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MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS BILL, 2020

MAY 15, 2019.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Ms. WASSERMAN SCHULTZ, from the Committee on Appropriations, submitted the following

R E P O R T

together with

MINORITY VIEWS

[To accompany H.R. 2745]

The Committee on Appropriations submits the following report in explanation of the accompanying bill making appropriations for military construction, the Department of Veterans Affairs, and related agencies for the fiscal year ending September 30, 2020, and for other purposes.

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PURPOSE OF THE BILL

The purpose of the bill is to support our military and their families and provide the benefits and medical care that our Veterans have earned because of their service to our Nation. This is accomplished through the programs funded in the bill, which provide the facilities and infrastructure needed to house, treat, train, and equip our military personnel to defend this Nation, both in the United States and abroad; provide the housing and military community infrastructure that supports a good quality of life for them and their families; and allow the military to maintain an efficient and effective base structure. The quality of life for our servicemembers and their families is a key component of readiness. The bill also funds a wide variety of assistance programs for Veterans, including disability and pension benefits, healthcare in many different settings, educational assistance, and home loan and insurance programs. Finally, the bill funds four related agencies that provide support to our Nation's heroes: the American Battle Monuments Commission, Cemeterial Expenses, Army (including Arlington National Cemetery), the United States Court of Appeals for Veterans Claims, and the Armed Forces Retirement Home.

SUMMARY OF COMMITTEE RECOMMENDATION

The Committee recommends $231,349,814,000 in budget authority for the fiscal year 2020 programs and activities funded in the bill. The fiscal year 2020 recommendation is an increase of $22,588,146,000 above the fiscal year 2019 enacted level and $6,130,359,000 below the President's request. Of the increase over the fiscal year 2019 enacted level, $12,507,301,000 is in mandatory

programs. Included in the total budget authority is $123,211,394,000 in mandatory budget authority and $108,138,420,000 in discretionary budget authority which includes $2,000,000,000 in emergency funding.

The Committee recommendation highlights the continued commitment to our servicemembers and their families and to our Veterans. In discretionary budget authority, the bill is 10 percent over the fiscal year 2019 enacted level. The bill includes an increase in military construction, which is 2 percent above the fiscal year 2019 level, and an increase in the Department of Veterans Affairs budget, which is 9 percent over the fiscal year 2019 level. While the Committee recommendation continues essential support for servicemembers and Veterans, it does not provide funds for projects or activities that lacked sufficient justification or were less mission-critical. Where it was prudent, the Committee recommendation rescinds prior year funding that is no longer needed for the purpose for which it was originally appropriated while leaving sufficient resources to close out contracts. Finally, the recommendation rescinds unobligated balances in certain military construction and VA accounts.

The programs funded in the bill for the Department of Defense (DOD) address the priorities of the Department's Agencies and the Services for the numerous facility challenges that they face. The funds provided support readiness improvements with new construction, family housing, and continued cleanup of military bases closed during previous Base Realignment and Closure rounds, support Combatant Commanders' requirements where appropriate, and ensure that our military personnel and their families' quality of life is preserved.

The total recommended funding level for military construction and family housing, including base and Overseas Contingency Operations funding, including the European Reassurance Initiative, is $13,460,420,000 which is $2,207,000,000 above the fiscal year 2019 enacted level and $7,625,759,000 below the budget request. The recommendation includes funding for Family Housing, funding for necessary construction on our bases, including barracks, health facilities and schools, and support for critical overseas investments as well as an additional $140,800,000 to address privatized family housing issues. The recommendation includes $921,420,000 for the European Deterrence Initiative and construction related to Overseas Contingency Operations, which helps ensure the protection of our allies and protects the warfighter. The recommendation also includes $2,000,000,000 to address the needs of military facilities damaged by Hurricanes Florence and Michael. The recommendation also includes $1,093,500,000 for the Services' unfunded priorities that are more than 35 percent complete in design and can be executed in fiscal year 2020.

The total funding level for fiscal year 2020 for the Department of Veterans Affairs is $217,467,894,000, an increase of $20,277,301,000 over the fiscal year 2019 enacted level. Of the total, $123,211,394,000 is provided for mandatory benefit programs and $94,256,500,000 is allocated to discretionary programs such as medical care, claims processing, and construction. In this bill, discretionary funding for the Department of Veterans Affairs is recommended at 9 percent over the fiscal year 2019 enacted level. For

fiscal year 2020, $75,550,600,000 for medical care has been appropriated in advance.

In addition, the Committee recommendation includes $87,636,650,000 in advance appropriations for fiscal year 2021 for the four health care accounts of the Department and $129,509,505,000 in advance appropriations for mandatory benefits programs for fiscal year 2021.

The Committee recommendation provides a total of $421,500,000 for the four Related Agencies: the American Battle Monuments Commission (ABMC), the U.S. Court of Appeals for Veterans Claims, Arlington National Cemetery, and the Armed Forces Retirement Home. The recommendation is an increase of $175,900,000 over the budget request and $103,845,000 over the fiscal year 2019 enacted level. These funds are provided to achieve the level of services and facility maintenance that is necessary to properly ensure that these agencies are able to continue their missions of honoring the service and sacrifice of our servicemembers and Veterans. In addition, the recommendation includes funding for planning, design, and construction of the Southern Expansion at Arlington National Cemetery, in order to extend the life of the cemetery.

MANAGEMENT AND OVERSIGHT INITIATIVES

The Committee believes the effective stewardship of taxpayer dollars is of the highest priority. In the interest of eliminating waste, fraud, and abuse in Federal programs, the Committee has and will continue to use public hearings, briefings, information requests, and reviews by the Government Accountability Office (GAO) and the Inspectors General to promote strong financial and program management, oversight and leadership at the Department of Defense (DOD), the Department of Veterans Affairs (VA), and Related Agencies under the jurisdiction of this bill.

The fiscal year 2020 appropriations Act and the accompanying report address management challenges of the Federal agencies it funds, including directives to strengthen financial and program management, eliminate redundancy, and improve implementation and oversight of initiatives that support the mission of this bill. The Committee will use every means at its disposal to reduce mismanagement that results in waste, fraud, and abuse.

Performance Measures.—The Committee directs each of the agencies funded by this Act to comply with title 31 of the United States Code, including the development of their organizational priority goals and outcomes such as performance outcome measures, output measures, efficiency measures, and customer service measures.

Customer Service Standards.—The Committee emphasizes the importance of implementing proper customer service standards. Development of these standards includes providing significant services directly to the public, identifying and surveying target customers, establishing effective service standards and tracking internal performance against those standards.

Department of Defense Military Family Housing.—Privatized housing has come under scrutiny over the last year with complaints of inadequate housing across the DOD enterprise due to lack of repairs, rodents, mold, cracks in walls and peeling paint. The military housing privatization initiative (MHPI) was estab-

lished by Congress in 1996 as a tool to help DOD improve the quality of life for its servicemembers by improving the condition of their housing. MHPI is a public/private venture (PPV) where private sector developers may own, operate, maintain, improve and assume responsibility for military family housing. The private entity is responsible for managing the construction, renovation, and day-to-day maintenance and services for the community. The PPV housing may be located on or off government property and may be former military family housing. DOD has mandated that all military family housing in the United States be eventually privatized. The recommendation includes an additional $140,800,000 within Housing Support Costs under Family Housing Operation and Maintenance accounts for the Services. The funding is to increase the Services' ability to provide oversight and management, and personnel to track current and future issues that may occur in military family housing. The Committee also includes report language directing DOD to submit various reports and maintain a maintenance database to track any issues that may be prevalent in the future. The Committee notes that the general welfare of a servicemember's family contributes to the overall state of readiness for DOD.

Department of Veterans Affairs (VA).—With the $217,467,894,000 provided for VA in this bill, the increase in the number of Veterans seeking VA medical services, and the transformative initiatives VA is undertaking, the Committee believes it is important to strengthen its tools to monitor spending as well as the operating procedures of the VA workforce. The following initiatives demonstrate the Committee's oversight focus:

VA Electronic Health Record Modernization (EHRM).—After at least a decade of Congressional encouragement to DOD and VA to develop a single electronic health record (EHR), VA has completed a contract to acquire the same EHR that DOD is adopting. The bill includes $1,603,000,000 for the EHR contract entered in 2018, and continues strict quarterly reporting of timelines, performance milestones, costs, implementation, and change management. The bill also continues the requirement for GAO to review EHRM implementation so that Congress can be informed of any problems at a point where they can be promptly and economically addressed.

Disability Claims and Appeals.—Thanks to the significant investments Congress has provided over the past eight years, VA has been able to hire the staff, acquire the technology, and change work processes necessary to reduce the disability claims backlog to an "effective" zero. But as the number of claims continues to increase and the number of appeals skyrockets once claims are decided, VA again runs the risk of falling into serious claims and appeals backlogs. The Committee recognizes this threat and provides $25,000,000,000 above the Veterans Benefits Administration request to support staff overtime and digital claims scanning. The Committee hopes that with this additional investment and the recently passed legislation to reform the appeals process, Congress will have taken the necessary management action to prevent Veterans from enduring excessive waits to claim the disability benefits they deserve.

Information Technology (IT).—The Committee continues to include bill language prohibiting obligation or expenditure of funds for information technology systems development until VA submits

to the Committees a certification of the amounts. The bill limits the amount of funds that can be transferred into the IT account to ten percent of the total of either the source or destination account. The bill contains language that permits the reprogramming of funds among development projects upon prior notification to, and approval by, the Committees.

Stricter Control of Construction Funding.—The Committee continues to request quarterly briefings on the progress and cost of each facility managed by an outside entity. Several additional bill language provisions are included to enhance the Committee's capacity to conduct oversight on VA's facility construction efforts including: (1) no funding greater than $7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both Houses of Congress; (2) any change to the scope of a construction project is prohibited without the approval of the Committees; and (3) VA must report any bid savings of $5,000,000 or more on projects as soon as they are identified.

American Battle Monuments Commission (ABMC).—The Committee continues to provide funds to address the maintenance and repair needs of the American Battle Monuments around the world. The Committee directs ABMC to undertake these efforts in a proactive and timely manner, which will ensure that monuments do not fall into disrepair and require even greater investments to correct.

Department of Defense Civil Cemeterial Expenses.—The Committee continues to provide $80,800,000 for Arlington National Cemetery to maintain current services and ensure that critical operations do not go unaddressed. Additionally, the Committee provides $131,000,000 for the Southern Expansion project, to expand cemetery capacity in a timely manner and extend the life of the cemetery into the 2050 timeframe. The bill also maintains an Administrative Provision permitting funds from concessions at Army National Military Cemeteries to be used to support activities at the Cemeteries.

Armed Forces Retirement Home (AFRH).—The Committee provides increased funding to allow AFRH to address anticipated increases in costs such as personnel costs and contract inflation, as well as to address critical capital projects, particularly those affecting the health and safety of residents. This funding will allow AFRH to begin work on deferred maintenance projects, ensuring that AFRH is well-positioned to continue to improve its standing and increase revenue for the long term. The Committee notes efforts that are underway to stabilize the AFRH Trust Fund and reduce reliance on transfers from the General Fund, and directs AFRH to continue to make progress in improving AFRH's sustainability.

TITLE I

DEPARTMENT OF DEFENSE

MILITARY CONSTRUCTION OVERVIEW

Fiscal year 2019 enacted level (including rescissions)	$10,332,000,000
Fiscal year 2020 budget request	11,241,653,000
Committee recommendation in the bill (including one rescission)	10,539,000,000
Comparison with:	
Fiscal year 2019 enacted level	207,000,000
Fiscal year 2020 budget request	(702,653,000)

Military construction accounts provide funds for new construction, construction improvements, planning and design, and host nation support. Projects funded by these accounts include facilities for operations, training, readiness, maintenance, research and development, supply, medical care, and force protection, as well as unaccompanied housing, military-owned family housing, utilities infrastructure, and land acquisition.

In addition to the notification and reporting requirements for military construction programs contained in Title 10, United States Code, the Committee's recommendations include several provisions requiring DOD to report on various aspects of military construction programs, or to provide notification to the Committee when certain actions are taken. The Committee also retains prior approval authority for any reprogramming of funds exceeding a specific threshold.

Reprogramming Guidelines.—The following reprogramming guidelines apply for all military construction and family housing projects. A project or account (including the sub-elements of an account) that has been specifically reduced by Congress in acting on the budget request is considered to be a Congressional interest item and as such, prior approval is required. Accordingly, no reprogramming to an item specifically reduced below the threshold by Congress is permitted, except that DOD may seek reprogramming for appropriated increments.

The reprogramming criteria that applies to military construction projects is one percent of the funded amount to include new housing construction projects and improvements. To provide the Services the flexibility to proceed with construction contracts without disruption or delay, the costs associated with environmental hazard remediation such as asbestos removal, radon abatement, lead-based paint removal or abatement, and any other legislated environmental hazard remediation may be excluded, if such remediation requirements could not be reasonably anticipated at the time of the budget submission. Reprogramming is a courtesy provided to DOD and can be taken away if the authority is abused. This exclusion applies to projects authorized in this budget year, as well as projects authorized in prior years for which construction has not been completed. Planning and design costs associated with military construction and family housing projects may also be excluded from these guidelines. In instances where prior approval for a reprogramming request for a project or account has been received from the Committees on Appropriations of both Houses of Congress, the adjusted amount approved becomes the new base for any future increase or decrease via below-threshold reprogramming

(provided that the project or account is not a Congressional interest item as defined above).

In addition to these guidelines, the Services are directed to adhere to the guidance for military construction reprogramming actions and notifications, including the pertinent statutory authorities contained in DOD Financial Management Regulation 7000.14–R and relevant updates and policy memoranda. The Committee further encourages the Office of the Director of National Intelligence to use a format similar to that used by the Office of the Secretary of Defense to submit reprogramming requests.

Diversion of Military Construction Funds for a Border Wall.—On February 15, 2019, President Trump declared a National Emergency to use section 2808 of title 10, United States Code to bypass congressional intent and divert valuable military construction funding from previously approved national security projects to fund a border wall. Congress chose not to fund this wall in the Consolidated Appropriations Act, 2019 (P.L. 116–6). The Committee notes there is bipartisan opposition to the action taken by the President, as both the House and Senate voted to disapprove the President's emergency declaration. Despite bipartisan congressional opposition, the fiscal year 2020 budget request for military construction included $7,200,000,000 to restore funding (up to $3,600,000,000) that would be diverted for the wall as well as provide the next installment of wall funding ($3,600,000,000). The Committee recommendation does not provide these requested funds. Also, the accompanying bill includes language that protects previously appropriated projects, as well as fiscal year 2020 projects included in this bill from being used as a source for wall funding. The Committee believes that Congress must assert its role as a co-equal branch of the Federal government and insist upon the regular appropriation of funds—funds this Committee has previously appropriated for disaster recovery, flood protection, and military base construction projects to maintain and improve military readiness. The Committee believes that military construction dollars should be used only for the purpose they are provided, which is to support DOD's mission, servicemembers, and their families.

Facilities Sustainment, Restoration and Modernization (FSRM).—DOD is directed to continue describing on form 1390 the backlog of FSRM requirements at installations with future construction projects. For troop housing requests, form 1391 should describe any FSRM conducted in the past two years. Likewise, future requirements for unaccompanied housing at the corresponding installation should be included. Additionally, the forms should include English equivalent measurements for projects presented in metric measurement. Rules for funding repairs of facilities under the operation and maintenance accounts are described below:

(1) components of the facility may be repaired by replacement. Such replacement can be up to current standards or codes;

(2) interior arrangements and restorations may be included as repair;

(3) additions, new facilities, and functional conversions must be performed as military construction projects. Such projects may be done concurrently with repair projects as long as the

final conjunctively funded project is a complete and usable facility; and

(4) the appropriate Service Secretary shall notify the appropriate committees 21 days prior to carrying out any repair project with an estimated cost in excess of $7,500,000. The Committee strongly encourages the Services and defense agencies to indicate the plant replacement value of the facility to be repaired on each such notification.

Quarterly Summary of Notifications.—The Committee directs the Services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to continue to submit a quarterly report listing all notifications that have been submitted to the Committees during the preceding three-month period.

Work in Progress or Planned (WIP) Curve.—The Committee directs the Services and the Office of the Secretary of Defense (on behalf of itself and defense agencies) to submit a WIP curve for each project requested in a budget submission over $25,000,000 with the form 1391 justification to the congressional defense committees. The Committee is concerned that there is an alarming amount of unawarded prior-year military construction projects, and therefore the Committee directs the Secretary of Defense to report to the congressional defense committees quarterly, beginning in the second quarter of fiscal year 2020 and each quarter thereafter of projects that remain unawarded from the current and prior fiscal years and the reasons for delay.

Transfer of Funds To and From the Foreign Currency Fluctuations, Construction, Defense Account.—The Committee directs DOD to submit a quarterly report to the Committees on Appropriations of both Houses of Congress on the transfer of funds from military construction and family housing accounts to the Foreign Currency Fluctuations, Construction, Defense account. The report shall specify the amount transferred to the Foreign Currency account from each military construction and/or family housing account, and all other accounts for which an appropriation is provided in this Act, during the preceding fiscal quarter, and the amounts transferred from the Foreign Currency account to the above accounts during the same period. This report shall be submitted no later than 30 days after the close of each fiscal quarter. In addition, DOD shall notify the Committees on Appropriations of both Houses of Congress within seven days of transferring any amount in excess of $10,000,000 to or from the Foreign Currency account.

Bid Savings.—The Committee has ascertained from cost variation notices required by 10 U.S.C. 2853 that DOD has canceled two projects that were previously appropriated military construction projects. The Committee's recommendation, therefore, includes a rescission to the Military Construction, Defense-Wide account. The Committee directs the Secretary of Defense to continue to submit 1002 reports on military construction bid savings at the end of each fiscal quarter to the Subcommittees on Military Construction, Veterans Affairs, and Related Agencies of both Houses of Congress.

Incremental Funding of Projects.—In general, the Committee supports full funding for military construction projects if they are executable. However, it continues to be the practice of the Committee to provide incremental funding for certain large projects to enable the Services to more efficiently allocate military construc-

tion dollars among projects that can be executed in the year of appropriation. Therefore, the Committee recommendation includes 19 projects that have been incrementally funded; however, the full authorization of the projects will be provided in the fiscal year 2020 National Defense Authorization Act.

Impacts of Climate Change and Investing in Multi-Hazard Resilient Defense Infrastructure.—The Committee is concerned by increasing magnitudes and frequencies of environmental shocks (e.g., hurricane-force winds, storm surge, and extreme rainfall) and long-term stresses (e.g., from sea level rise) on DOD facilities worldwide. Recent extreme weather and natural disasters, for example, Hurricane Michael in 2018 that heavily damaged Tyndall Air Force Base in Florida, illustrate the challenges facing DOD in mitigating and preparing for inevitable future disasters and improving the security and readiness of the Nation's coastal military installations and the safety of military housing. The Committee supports the military's continued focus on building lasting and resilient military installations, including methods that update hurricane-resistant building codes for bases, barracks, hospitals, and airfields. It also encourages continued consideration of severe drought and desertification as potential threats to military installations and missions. In addition to Department-wide initiatives, such as revised structure planning, conservation programs and modeling new installations with the threat of sea-level rise in mind, the Committee encourages DOD to prioritize investing in climate-sustainable infrastructure projects. Such investments have yielded positive results including increased resiliency and cost savings. The Committee urges DOD to collaborate with existing research universities with federally designated testing facilities to accelerate investments to assess DOD installation vulnerabilities at home and abroad and to develop and test resilient infrastructure and technologies capable of withstanding 200 mph winds and high levels of storm surge and flooding. Furthermore, the Committee directs the Secretary of Defense to report to the congressional defense committees no later than 180 days after enactment of this Act detailing DOD's plans to develop lasting and resilient military installations, and what year these projects will appear in the Future Years Defense Plan.

Hawaii Infrastructure Readiness Initiative.—The Committee recognizes the strategic and critical role the Hawaii Infrastructure Readiness Initiative (HIRI) plays in DOD's strategic plans for the Indo-Pacific region. At the direction of Congress, United States Army Pacific (USARPAC) created the HIRI to address critical priorities established in USARPAC's military construction submissions and major restoration and maintenance (R&M) programming requests. According to the Army's analysis, 45 percent of the infrastructure in Hawaii is failed or failing, putting efforts to meet operational needs at risk. To fix this crisis, HIRI allocates between $50,000,000 and $150,000,000 per year through fiscal year 2030 to address major infrastructure needs, with a ten-year cost of $1,100,000,000. The program addresses several major facility and infrastructure deficiencies, including aviation maintenance facilities, operations facilities, tactical equipment maintenance facilities, Pohakuloa Training Area, West Loch Ammunition Storage, and base operations. The President's Budget for fiscal year 2019 included funds for this critical initiative. The fiscal year 2020 budget

submission includes the West Loch Ammunition Storage Facility, a vital military construction project. Continued and consistent funding is needed at a time of growing national security needs in the Pacific. Therefore, the Committee directs the Secretary of the Army to certify that the Initiative's plan for the next 10 fiscal years does not create gaps in funding that will result in inconsistent program implementation that could undermine the interconnected nature of HIRI's projects.

Strengthening our Alliances in the Indo-Pacific Area of Responsibility (AOR).—According to the National Defense Strategy, the United States is seeking to strengthen our alliances and partnerships in the Indo-Pacific AOR to include a networked security architecture capable of deterring aggression, maintaining stability and ensuring free access to common domains. This effort to rebalance toward the Pacific will include significant military construction requirements throughout the Indo-Pacific AOR. Therefore, the Committee directs the Service Secretaries to submit a report to the congressional defense committees no later than 180 days after enactment of this Act detailing (1) military construction requirements in the Indo-Pacific AOR over the next ten years, sorted by fiscal year, country and State and (2) efforts to coordinate these requirements across the Services.

Adequate Childcare for Military Families.—The Committee is aware of the importance of helping military families secure adequate childcare for their children. DOD has argued that these childcare benefits help support their recruiting, retention and readiness goals, and that there is generally a high level of satisfaction among servicemembers who use DOD childcare services. However, the success of the program depends, in part, on ensuring adequate facilities for child development centers (CDCs) and School Age Care (SAC) Program facilities, preferably on military installations. Hearings before the Committee have noted a lack of facilities in some locations. Thus, the Committee directs the Service Secretaries to submit a report to the congressional defense committees no later than 180 days after enactment of this Act detailing (1) all installations that have CDCs and SAC facilities, (2) the physical condition of these facilities, and (3) the length of time military families must wait before enrolling their children into CDCs and SAC programs.

Recycling of Tire Rubber.—The Committee is aware of recent advances in the use of waste tire rubber in asphalt, known as rubber modified asphalt (RMA), and encourages the Army to engage the research community and academia to study the potential benefits of rubber modified asphalt and to consider utilizing RMA on domestic military installations.

Quality of Life (QOL) Projects Priority List.—The Committee notes the ongoing challenges that the lack of QOL projects, such as the lack of Childcare Development Centers (CDCs), creates a hardship to servicemembers and their families. The Committee is concerned that too often QOL projects are not included in budget submissions and this absence negatively impacts the QOL for servicemembers and their families. Given the demanding jobs that servicemembers must execute, creating unique solutions is required. The Committee notes that stable family life is a key component to mission readiness and retention. The Committee believes that requesting these QOL projects, like CDCs, should be a top pri-

ority amongst the Services. The recommendation includes an additional $11,000,000 in each of the Services' planning and design accounts to support the Services preparation for construction of new CDCs at the most underserved military installation. Therefore, the Committee directs the Service Secretaries to submit a report to the congressional defense committees no later than 90 days after the enactment of this Act that provides a plan to provide address QOL shortfalls, with an emphasis on CDCs, and at what installations they are most needed for the fiscal year 2020 and in the FYDP. The report should include associated funding requirements for every installation with an emphasis on CDCs. Further, the Committee directs that the Secretary of Defense to create a unified list of needed QOL projects with an emphasis on CDCs across the enterprise which shall be submitted concurrently with the annual budget submission hereafter.

Federally Recognized Tribes.—The Committee notes our Nation's commitment to honoring treaty and trust obligations to Federally Recognized Tribes. While military operations and facility protection are important, upholding our commitments to Indian Country must be an equal priority. It has been observed that DOD has struggled to proactively engage with affected Tribes at the start of the planning process to ensure meaningful consultation can occur. Moreover, the Department does not identify sufficient funds to cover mitigation and alternatives should they be agreed upon. To understand the scale of this problem, the Committee directs the Secretary of Defense to provide the Committee a list of military construction projects related to mitigation and/or changes to projects were required within the past five years where consultation with a Federally Recognized Tribe, the outcome of each consultation, a list of all project modifications and/or mitigation requests made by the Tribe (or Tribes) in question for each project, the cost of each measure, and which modifications and or mitigations were adopted no later than 180 days after enactment of this Act.

Securing Mission-Critical Infrastructure.—The Committee is aware that DOD is undertaking efforts to secure mission-critical infrastructure through modernization of industrial control systems at priority locations. Modernized electrical, mechanical, and hydraulic systems can improve energy management and reduce operating costs at DOD facilities. However, higher connectivity to these systems exposes exploitable vulnerabilities and increases the threat from potential cyberattacks. The Committee directs quarterly reports by DOD beginning in the first quarter of fiscal year 2020 showing the steps the Department is taking to ensure that industrial control systems in ongoing and future military construction projects are secure.

Other Transaction Authority.—The Committee is aware that the use of Other Transaction Authority provides a streamlined acquisition tool to accelerate project delivery. When leveraged appropriately, Other Transaction Authority also gives the Federal government greater access to innovative, state-of-the-art technology solutions from the commercial sector. DOD is encouraged, in consultation with the Corps of Engineers, to expand its use of Other Transaction Agreements to execute the Military Construction program.

High Performance and Sustainable Building Requirements.—The Committee recognizes that innovative technologies, including advanced wood products and recycled aerospace grade carbon fiber composite, have expanded the availability of materials with lower embodied energy for facilities that require exceptional durability and blast resistance. In addition, design techniques such as advanced framing contribute to lower material costs, increased energy efficiency, and reduced waste in facilities. Therefore, the Committee directs the Secretary of Defense to continue to utilize innovative renewable building materials, systems, and design techniques that support the requirements of UFC 1 200 02 and UFGS 06 17 19. Furthermore, the Committee directs the Secretary of Defense to work with universities, public agencies, and experienced nonprofit organizations to develop a plan to expand the application of these innovative technologies in future military construction projects and report to the Committee no later than 90 days after enactment of this Act on how the Department will implement the plan.

Defense Access Roads (DAR) Program.—The Committee is supportive of the DAR program as a vital mechanism in providing transportation infrastructure to domestic installations and additional funding from DOD for mission-critical, off-base transportation improvements. The Committee notes the expansion of DAR for the first time in fiscal year 2019, which made funds available to pay the cost of repairing and mitigating damage to infrastructure and highways by recurrent flooding and sea-level fluctuation if the Secretary determined that continued access to military installations were affected by flooding and projected sea-level fluctuation. The Services recently reported to Congress that there currently are no flood-prone locations creating a national security risk to transportation access for military installations and that DOD has the necessary means to address any flooding issues or risks (storm or non-storm surge) that may impact DOD missions for roads that meet DAR criteria. The Committee understands that there are numerous roadways providing transportation access to military installations that experience flooding and sea-level fluctuation and expects the Services to work with the local communities to certify these public roads that are hampering readiness for the military.

Cyberspace Operations Facilities.—The Committee recognizes the importance of secure, up-to-date, and centralized cyberspace operations facilities at military installations because of the crucial role they play in securing information technology infrastructure. Therefore, the Secretary of Defense is directed to conduct a review of the condition of cyberspace operations facilities at military installations and submit the review and a plan to address the issues identified in the review by fiscal year to the congressional defense committees no later than 180 days after the enactment of this Act.

HVAC Efficiency.—The Committee recognizes that the Federal Acquisition Regulation (48 C.F.R. Subpart 23.8) requires DOD, in servicing or replacing existing HVAC systems that use R–22, to give preference to alternatives that reduce overall risks to the environment, including stratospheric ozone depletion and global warming potential (GWP). Where feasible, DOD must use R–22 alternatives that have been approved by EPA as acceptable under its

Significant New Alternatives Policy (SNAP) program and that have lower GWP than R–22. Accordingly, the Committee instructs DOD to use such alternatives in servicing or replacing existing HVAC systems. The Committee believes that DOD's replacement of R–22 with alternatives that have a GWP lower than R–22, and are at least as energy efficient, will greatly reduce the overall environmental impacts of DOD operations.

Access Control Points in Urban Areas.—The Committee supports accelerating funding for access control point projects to installations that face high-security risks to critical missions. Priority in allocating funds shall be given to access control points in heavily congested areas in large urban settings that place major transportation links at risk of incident closures.

MILITARY CONSTRUCTION, ARMY

Fiscal year 2019 enacted level	$1,021,768,000
Fiscal year 2020 budget request	1,453,499,000
Committee recommendation in the bill	1,132,499,000
Comparison with:	
Fiscal year 2019 enacted level	110,731,000
Fiscal year 2020 budget request	(321,000,000)

The recommendation includes additional funding for the Army in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Rapid Deployment Requirements.—The Committee is concerned that installations with rapid deployment requirements have insufficient rail and transport logistics infrastructure to efficiently move equipment in support of deployments, training operations, and evolving Army requirements. For example, Fort Bliss has only one railhead connection point for its deployment and redeployment activities. Therefore, the Secretary of the Army is directed to conduct a review of rail and transport logistics infrastructure and equipment deployment methods at installations with rapid deployment requirements and submit the review and a plan to address the issues identified in the review by fiscal year to the congressional defense committees no later than 90 days after the enactment of this Act.

Access Control Points.—The Committee is aware that the Army has access control points (ACP) at military installations that do not meet current design criteria and U.S. Army Corps of Engineers standards as noted in House Report 115–673. Unfortunately, these concerns have not been addressed. Army installations are still encountering traffic backups, are operating at less than optimal efficiency and are vulnerable to hostile direct action and penetration attempts. Replacing an ACP is a military construction project that includes several discrete components, such as a visitor control center, gatehouses, canopy areas, guard booths, barriers, and cybersecurity and surveillance systems. Given that upgrading an ACP can take several years, the Committee directs the Army to both prioritize these important security projects in its construction program and to review the backlog of existing ACP projects to determine which can be accomplished sooner through smaller, incremental components within the minor construction account that

would enhance installation security and achieve U.S. Army Corps of Engineers Standards.

Motor Pools.—In order to be able to deploy on command and conduct decisive full-spectrum operations, the Army must have well-maintained and ready-to-deploy equipment. The readiness of this equipment relies on an effective, comprehensive maintenance program, which in turn, enhances and facilitates training and warfighting. This is particularly important for units that rely on armored vehicles as their primary weapons system. However, quality maintenance requires appropriately designed, sized, supplied, and staffed motor pools and maintenance facilities. The Committee requests a report on the condition, current and anticipated capacity requirements, and modernization needs of motor pools that support the rapid deployment of armored combat units within 90 days of enactment of this Act. The report should include information on recent upgrades and construction of motor pools, as well as planned investments included in the future years defense program.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

Fiscal year 2019 enacted level	$2,118,619,000
Fiscal year 2020 budget request	2,805,743,000
Committee recommendation in the bill	2,205,771,000
Comparison with:	
Fiscal year 2019 enacted level	87,152,000
Fiscal year 2020 budget request	(599,972,000)

The recommendation includes additional funding for the Navy and Marine Corps in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of Secretary of Defense and submitted to Congress in priority order.

Navy Pier Replacement Master Plan.—The Committee is concerned that the Navy has not properly synchronized or prioritized pier replacement projects. Many of the current piers are in disrepair or in need of complete replacement. The Committee directs the Secretary of the Navy to provide to the congressional defense committees a report 90 days after enactment of this Act on pier replacement projects in the fiscal years defense plan for 2021–2025.

Major Range and Test Infrastructure.—The Committee is aware of significant infrastructure and upgrades that are needed across the enterprise of Major Range and Test Facility bases (MRTFB) of the Department of Defense. Many MRTFBs have significant backlogs in infrastructure needs because they do not score well in the military construction prioritization process. The Committee is concerned that as new technologies are tested, there are not adequate facilities that will allow for successful testing, like with hypersonic weapons and other emerging technologies. Additionally, the Committee notes that DOD has not provided to the congressional defense committees an annual report, as required by section 2806 of the National Defense Authorization Act for Fiscal Year 2018, (P.L. 115–91), on DOD laboratory construction needs. The Committee is also aware of a specific backlog of construction projects at Naval Air Station (NAS) Patuxent River. NAS Patuxent River has been pivotal in testing many new systems that support the fleet. The Aircraft Prototype Facility has enabled aircraft preparation and technology support to permit full-scale fabrication of advanced

structures. The third and final phase would directly support the Navy's emphasis on rapid prototyping consistent with Maritime Accelerated Capabilities Office to capture innovation and speed solutions to the warfighters. The Navy expects that the facility is needed given current capacity constraints. The Committee is also aware that significant upgrades are needed to the Webster Outlying Field (WOLF) Air Traffic Control (ATC) tower to enable basic operational needs for the Navy test pilot program and UAV platforms. The current ATC was constructed in 1978 and needs urgent replacement. The Navy has included these projects in their FYDP. The Committee urges the Navy to keep these projects, as planned, and more broadly, better address the broader infrastructure needs at MRTFBs.

The Strategic and Critical Role of Public Shipyards.—The Committee recognizes the strategic and critical role our public shipyards play in the national security of our Nation. However, our shipyards are in direct need of maintenance and upgrade. The National Defense Authorization Act for Fiscal Year 2018, (P.L. 115–91) included language directing DOD to create a Shipyard Infrastructure Optimization Plan. This plan included recommendations and future year projects that would help to restore our public shipyards to support our fleet around the world. The Committee directs the Secretary of Defense no later than 180 days after enactment of this Act to submit to congressional defense committees a prioritized list of projects to be constructed under the Shipyard Infrastructure Optimization Plan necessary for national security requirements over the next ten years.

MILITARY CONSTRUCTION, AIR FORCE

Fiscal year 2019 enacted level	$1,440,323,000
Fiscal year 2020 budget request	2,179,230,000
Committee recommendation in the bill	1,588,730,000
Comparison with:	
Fiscal year 2019 enacted level	148,407,000
Fiscal year 2019 budget request	(590,500,000)

The recommendation includes additional funding for the Air Force in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

F–35 Beddown and 21st Century Installation.—The current estimate for F–35 beddown at Tyndall Air Force Base is $350,000,000. It is the understanding of the Committee that the Air Force is still determining what additional facilities would be required for the additional three squadrons. The Committee believes that it would not be prudent to have 5th generation air assets like the F–35 housed in inappropriate hangars that fail to protect the aircraft from the elements. Therefore, the Committee directs the Air Force to provide a detailed timeline by fiscal year, location and costs of necessary facilities, including estimates for hurricane-related military construction at Tyndall Air Force Base and the F–35 aircraft delivery timeline, by base to the congressional defense committees no later than 60 days after enactment of this Act.

F–22 Rebasing.—Hurricane Michael caused catastrophic damage to the Tyndall Air Force Base and dislocated the 43rd Fighter

Squadron. It is the understanding of the Committee that the Air Force has the opportunity to restructure F–22 Raptor rebasing for long-term health and readiness. The current estimate for the relocation of F–22s is $150,000,000 for additional facilities required at existing F–22 bases to support the formal training unit and operational squadron. The Committee directs the Secretary of the Air Force to provide by cost, location and fiscal year the necessary military construction projects no later than 60 days after enactment of this Act.

Air Traffic Control Towers.—The Committee is concerned that the Department of the Air Force's ATC Towers have been neglected over the years, and funding for military construction has been deferred to the out years of budget submissions. Many of the air towers are deteriorating and antiquated, creating significant life, safety, and health concerns. In some cases, towers have developed extensive mold issues and contain health risks related to the use of asbestos and lead-based paint. Additionally, obstructed views in some cases prevent 100 percent positive visual control of aircraft landing and taxiing on the airfield. The Committee urges the Department of the Air Force to prioritize funding for these towers in a much timelier manner. The Committee believes that these towers are valuable national security assets that the Department of the Air Force should maintain in a manner that will ensure their vital role in protecting United States national security interests.

Air Force Dormitories.—The Committee is concerned with the condition of dormitories at numerous Air Force bases around the country, especially at those in cities with large military populations. The Committee, therefore, directs the Secretary of the Air Force to submit a report to the congressional defense committees detailing the process and formulas it uses to prioritize its infrastructure renovation and upgrade projects no later than 60 days after enactment of this Act.

Offutt Air Force Base.—The Committee continues to have concerns on the impacts of recent flooding at Offutt Air Force Base. The Committee is committed to ensuring United States Strategic Command, the 55th Wing, and the Nebraska National Guard receive the necessary funding to return Offutt Air Force Base to fully mission capable. The unique facilities and assets at Offutt Air Force Base are a cornerstone of our national security and provide many one-of-a-kind capabilities, thereby guaranteeing the Nation's airborne intelligence gathering superiority, survivable nuclear command and control, and the effectiveness of our strategic deterrent.

Air Education and Training Command (AETC).—The Committee recognizes the importance of adequate facilities for basic military training, flying training, and the other training missions of the AETC. Outdated and inadequate AETC facilities, including dormitories, harm the Department of the Air Force's ability to recruit, train, and retain Airmen and increase operations and maintenance costs. The Committee urges the Department of the Air Force to prioritize funding for AETC facility design, construction, and construction improvements because of the critical role training plays in force readiness for future threats to U.S. national security.

Air Education and Training Command Drainage Projects.—The Committee recognizes the adverse impact that flooding and other infrastructure challenges have had on AETC facilities, equipment,

operations, and training. The Committee also recognizes the steps that the Air Force has taken to begin mitigating the damage through multi-year projects. The Committee supports these efforts and urges the Secretary of the Air Force to prioritize these projects.

MILITARY CONSTRUCTION, DEFENSE-WIDE

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2019 enacted level	$2,550,728,000
Fiscal year 2020 budget request	2,504,190,000
Committee recommendation in the bill	2,025,799,000
Comparison with:	
Fiscal year 2019 enacted level	(524,929,000)
Fiscal year 2020 budget request	(478,391,000)

Transfer of Funds.—The accompanying bill provides transfer authority to the Secretary of Defense to allow the transfer of funds to such appropriations of DOD available for military construction or family housing as the Secretary may designate.

The recommendation includes a reduction of $10,000,000 from the contingency construction account.

The recommendation includes a rescission of $45,055,000 from unobligated balances in section 125 under Administrative Provisions.

Excess Inventory of Infrastructure.—The Committee recognizes the issue of excess inventory within DOD and encourages the Department to consider a Military Installation Savings Commission (MISC). This would create a focus on integrating and consolidating functions, outsourcing services, assisting in the transition of underused facilities to higher economic use, and provision of the necessary resources for successful outcomes in affected communities.

Investment in Renewable Energy Systems.—The Committee supports the military's continued investment in renewable energy systems, including the use and application of solar energy for mobility and resilience capabilities at defense military installations including military bases, barracks, hospitals, and airfields. Such investments have yielded positive results such as increased resiliency and cost-savings. The Committee encourages DOD to prioritize funding for renewable energy-related projects, including solar, to mitigate risk to mission-critical assets and to promote energy security and efficiency at military installations. Accordingly, the Committee requests a report no later than 180 days after enactment of this Act detailing DOD's plans for further development of renewable energy systems at military installations and a timeline and goals for increased utilization.

Natural Disasters and Military Installations Resiliency.—The Committee supports the military's continued focus on building lasting and resilient military installations, including methods that update hurricane-resistant building codes for bases, barracks, hospitals, and airfields. It further considers the impact of severe drought and desertification as high potential instability areas and how these two hazards impact bases and missions. In addition to Department-wide initiatives such as revised structure planning, conservation programs and modeling new installations with the threat of sea-level rise in mind, the Committee encourages DOD to prioritize investing in climate-sustainable infrastructure projects.

Such investments have yielded positive results like increased resiliency and cost-savings. Accordingly, the Committee requests a report no later than 180 days after enactment of this Act detailing DOD's plans to further develop lasting and resilient military installations.

Energy Conservation.—The Committee commends DOD's forward posture on the need to improve energy resilience, improve mission assurance, save energy, and reduce energy costs. DOD must continue to increase the integration of alternative energy sources, particularly through renewable sources, throughout military facilities and installations. Energy resilience is critical to mission assurance for military units that perform cyber and intelligence, surveillance, and reconnaissance functions, missions vitally important to America's complex global engagements. The Committee directs the Secretary of Defense to provide a report no later than 90 days after enactment of this Act on DOD's strategy to increase energy conservation efforts and on energy cost savings, improved unit readiness, and opportunities for return on investments of existing and planned projects.

Rhine Ordnance Barracks Medical Center Replacement.—The Committee fully understands the strategic importance of this hospital. In the Consolidated Appropriations Act, 2018 (P.L. 115–141) the Committee directed the Director of the Defense Health Agency to report to the congressional defense committees: (1) specific changes in German energy law that affected the energy study; (2) what United States sources of energy the new German energy laws incorporate; (3) what United States sources are no longer able to be used in Germany; (4) what effect the changes in law have on other military construction projects, construction costs and current utilities contracts in the region; and (5) what effect this delay may have on other aspects of the Rhine Ordnance Barracks Medical Center Replacement Project. In addition to this requirement, the Committee directed the Director of the Defense Health Agency to provide to the congressional defense committees (1) an updated form 1391 to include a WIP curve; (2) the total amount of funding for the utility plant that is within the military construction program; and (3) a list of other of appropriations, if any, that are being used for utility costs. This report has not yet been received by the Committee. In addition to the prior reporting requirement, the Committee directs the Director of the Defense Health Agency to provide the total amount of funding that has been obligated of the $50,095,000 requested in the original form 1391 for the central utility plant and the percentages of Russian-exported natural gas and domestically-sourced natural gas that will be used at the utility plant no later than 90 days after enactment of this Act. We need to ensure our military installations are not compromised, as well as ensure energy security through diversification of fuel sources.

DOD Installation Energy Policy.—DOD installation energy use accounts for nearly a quarter of all Federal government energy consumption. In fiscal year 2015, according to DOD's Annual Energy Management Report, the Department spent $3,900,000 on installation energy. While DOD has made great strides in increasing installation energy efficiency and reducing overall energy consumption, more needs to be done to bring down the energy costs throughout the Department. DOD must also ramp up its efforts to

enhance energy security on its installations through a range of actions, including investing in renewable energy and smart technology that can shield mission-critical operations from disruptions to the power grid. According to a January 2017 report commissioned by the Pew Charitable Trusts (Power Begins at Home: Assured Energy for U.S. Military Bases), DOD could enhance energy security on installations and save hundreds of millions of dollars annually by investing in microgrids and renewable energy systems, and by increasing energy efficiency on military bases. The report found that microgrid power systems are more reliable than the stand-alone diesel generators typically used for backup power and could save $8,000,000 to $20,000,000 over a 20-year period. The report also found that DOD could save as much as $1,000,000,000 a year simply by increasing the use of commercially available energy efficiency measures in its facilities. The Committee notes that military installations in Hawaii are among those at the forefront of DOD's efforts to increase energy efficiency and security, including projects to develop net-zero energy military housing and installation facilities, upgrade and retrofit systems to improve energy and water efficiency and demonstrate microgrid technology. The Committee supports DOD's investments in energy efficiency, renewable energy systems, and energy security, and provides $190,000,000 for the Energy Resilience and Conservation Program, an increase of $40,000,000 above the request.

Information Technology Infrastructure for Military Construction Projects.—In the fiscal year 2019 conference agreement, the Committee directed the Secretary of Defense to report to the Committee no later than 60 days after enactment on how the Department is incorporating technology advancements and working with industry partners to gain efficiencies and savings on military construction projects. The Committee directs the Secretary to provide a status on the fiscal year 2019 directive.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

Fiscal year 2019 enacted level	$190,122,000
Fiscal year 2020 budget request	210,819,000
Committee recommendation in the bill	210,819,000
Comparison with:	
Fiscal year 2019 enacted level	20,697,000
Fiscal year 2020 budget request	– – –

The recommendation includes additional funding for the Army National Guard in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Army National Guard Readiness Centers Investment.—The Committee remains concerned by the failure of the Army to prioritize investment in Army National Guard Readiness Centers. These facilities are critical infrastructure in the protection of the homeland and in responding to domestic emergencies. Their deteriorating conditions are detrimental to the readiness of the Army Guard and present significant safety concerns. The Committee encourages the Army to accelerate investments in Readiness Centers within the fiscal year 2020 FYDP to include the $1,200,000,000 for the Army National Guard Transformation Plan.

MILITARY CONSTRUCTION, AIR NATIONAL GUARD

Fiscal year 2019 enacted level	$129,126,000
Fiscal year 2020 budget request	165,971,000
Committee recommendation in the bill	115,971,000
Comparison with:	
Fiscal year 2019 enacted level	(13,155,000)
Fiscal year 2020 budget request	(50,000,000)

The recommendation includes additional funding for the Air National Guard in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Puerto Rico Construction.—The Committee is concerned that the Department has yet to obligate supplemental funding provided by Congress to assist Puerto Rico in recovering from the devastating Hurricane Maria. The Committee believes hurricane-related damage should be addressed prior to new construction, and as such, the recommendation does not include funding for Air National Guard projects at the Luis Munoz-Marin International Airport. However, the Committee expects the Department to submit these projects for consideration in the future.

Dannelly Field Environmental Impact Statement (EIS) and Record of Decision (ROD).—The Committee encourages the Department to maintain its schedule for finalizing the EIS and ROD for Dannelly Field and to ensure future projects are not delayed.

MILITARY CONSTRUCTION, ARMY RESERVE

Fiscal year 2019 enacted level	$64,919,000
Fiscal year 2020 budget request	60,928,000
Committee recommendation in the bill	60,928,000
Comparison with:	
Fiscal year 2019 enacted level	(3,991,000)
Fiscal year 2020 budget request	– – –

MILITARY CONSTRUCTION, NAVY RESERVE

Fiscal year 2019 enacted level	$43,065,000
Fiscal year 2020 budget request	54,955,000
Committee recommendation in the bill	54,955,000
Comparison with:	
Fiscal year 2019 enacted level	11,890,000
Fiscal year 2020 budget request	– – –

MILITARY CONSTRUCTION, AIR FORCE RESERVE

Fiscal year 2019 enacted level	$38,063,000
Fiscal year 2020 budget request	59,750,000
Committee recommendation in the bill	59,750,000
Comparison with:	
Fiscal year 2019 enacted level	21,687,000
Fiscal year 2020 budget request	– – –

The recommendation includes additional funding for the Air Force Reserve in section 124 under Administrative Provisions for projects on the Services Unfunded Priority lists as provided by the Office of the Secretary of Defense and submitted to Congress in priority order.

Air Force Reserve Hangars.—The Committee is concerned that many of the Air Force Reserve hangars that were damaged during the record-breaking 2017 hurricane season are unsafe, antiquated,

and do not provide adequate protection of Air Force Reserve air assets. For example, hangars located at Homestead Air Reserve Base have become wholly inadequate due to constrained military construction budgets and devastating storm damage and are putting equipment and air assets at risk. The Committee is concerned that this could be a problem throughout the Air Force Reserve enterprise with the recent reductions to DOD's construction accounts. Therefore, the Secretary of the Air Force is directed to conduct a risk assessment on Air Force Reserve hangars damaged by natural events throughout the Air Force Reserve enterprise and develop a plan to update these facilities in the fiscal years 2021–2025 FYDP. This assessment shall be submitted to the congressional defense committees no later than 60 days after enactment of this Act.

NORTH ATLANTIC TREATY ORGANIZATION SECURITY INVESTMENT PROGRAM

Fiscal year 2019 enacted level	$171,064,000
Fiscal year 2020 budget request	144,040,000
Committee recommendation in the bill	172,005,000
Comparison with:	
Fiscal year 2019 enacted level	941,000
Fiscal year 2020 budget request	27,965,000

The North Atlantic Treaty Organization Security Investment Program (NSIP) consists of annual contributions by NATO member countries. The program finances the costs of construction needed to support the roles of the major NATO commands. The investments cover facilities such as airfields, fuel pipelines and storage, harbors, communications and information systems, radar and navigational aids, and military headquarters, both within NATO Nations and for "out of area" operations such as Afghanistan.

The United States occasionally has been forced to temporarily delay the authorization of projects due to shortfalls in United States obligation authority. The Committee directs the Secretary of Defense to notify the Committee within 14 days of the United States taking action to delay the authorization of projects temporarily, or to temporarily withhold funds from previously authorized projects, due to shortfalls in U.S. obligation authority.

The recommendation includes an increase of $27,965,000 for the NATO Security Investment Program (NSIP) for fiscal year 2020 to continue to assure our partner Nations and provide support against Russian aggression.

DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT

Fiscal year 2019 enacted level	$342,000,000
Fiscal year 2020 budget request	278,526,000
Committee recommendation in the bill	398,526,000
Comparison with:	
Fiscal year 2019 enacted level	56,526,000
Fiscal year 2020 budget request	120,000,000

The recommendation provides an additional $60,000,000 for the Navy to accelerate environmental remediation at installations closed under previous Base Closure and Realignment rounds. Furthermore, the Navy shall provide to the Committee a spend plan for these additional funds no later than 60 days after enactment of this Act.

Perfluorooctane Sulfonate (PFOS) and Perfluorooctanoic Acid (PFOA).—The Committee is concerned about the extent of PFOS/PFOA contamination at United States military installations. While this bill only covers military installations funded through the Base Realignment and Closure (BRAC) account that are affected by PFOS/PFOA, the issue is not limited to the Defense Department and affects many communities across the Nation. The Committee is encouraged by the Environmental Protection Agency's (EPA) announced plan to evaluate the need for a maximum contaminant level, as provided by the Safe Drinking Water Act, as well as designate these chemicals as hazardous substances under the Comprehensive Environmental Response, Compensation, and Liability Act, and urges the Department and affected communities to work closely with EPA. The Committee directs the Department to keep it apprised of new findings of PFOS/PFOA at BRAC sites and provides additional funds in this bill for the continued review of sites contaminated by PFOS/PFOA. Furthermore, the recommendation provides an additional $60,000,000 above the budget request to address PFOS and PFOA cleanup.

FAMILY HOUSING OVERVIEW

Fiscal year 2019 enacted level	$1,582,632,000
Fiscal year 2020 budget request	1,324,002,000
Committee recommendation in the bill	1,464,802,000
Comparison with:	
Fiscal year 2019 enacted level	117,830,000
Fiscal year 2020 budget request	140,800,000

Family housing construction accounts provide funds for new construction, construction improvements, the Federal government's costs for family housing privatization projects, and planning and design. The operation and maintenance accounts provide funds to pay for maintenance and repair, furnishings, management, services, utilities, leasing, interest, mortgage insurance, and miscellaneous expenses.

Housing Support Costs.—The recommendation includes an additional $140,800,000 within Housing Support Costs under Family Housing Operation and Maintenance accounts for the Services. The additional funds were identified by the Services on the Unfunded Priority list submitted to Congress by the Service Secretaries. The funding is to increase the Services' ability to provide oversight and management, and personnel to track current and future issues that may occur in military family housing.

Military Privatized Housing.—The Committee is concerned about the ability of the Department to readily assess the quality of its privatized housing. The quality of military housing is a key component of military readiness and quality of life. The National Defense Authorization Act for Fiscal Year 1996 (P.L. 104–106) allowed DOD to work with the private sector to build and renovate military housing. The Committee's oversight work has identified potentially unsafe conditions at privatized military housing throughout the Nation, ranging from electrical issues to mold, which undermines the congressionally-authorized privatized housing initiative. The Committee urges DOD to work with the private contractor management companies to prioritize funding for mold remediation in military housing in a timelier manner. The Committee believes that the

health of our servicemembers is of the utmost importance, and substandard living conditions negatively impact the ability to recruit and retain servicemembers, to the detriment of United States national security interests. In addition, DOD had to conduct extensive work to obtain an overview status report about these facilities since they do not feed into standard defense installations systems. Further, the Committee directs the Service Secretaries to submit a report to the congressional defense committees no later than 180 days after enactment of this Act detailing (1) how the Services monitor privatized facilities at a national level and (2) any planned upgrades to this system to improve transparency.

Privatized Housing-Safety and Health Threat Reporting.—The Committee expects DOD and the Services to establish and maintain procedures for ensuring response and remediation efforts to safety and health threats in military housing managed by private sector property management companies. The Committee expects privatized housing companies chosen by the Department to be knowledgeable, professionally trained, and capable of performing the proper response for the safety and health threats. The Services should constantly review the competency of repair personnel and contractors. The Committee notes that military personnel and family members are by their very nature temporary tenants of base housing. They are often not in a particular housing unit or building long enough to undertake a lengthy administrative process with a landlord. Rather than relying on the temporary tenants for much of the overall oversight of the safety and health aspects of privatized base housing, the Committee believes that the Services must fully shoulder this responsibility as the only reliable, long-term stewards of living standards in privatized base quarters. The Committee also urges DOD to take the necessary steps to ensure that families who have suffered as a result of negligent maintenance that resulted in issues such as mold, asbestos, radon, faulty electrical wiring, rodent and insect infestations, gas leaks and other safety and health threats are made whole when there has been failure of performance by contractors. Additionally, the Committee directs DOD to take immediate action when servicemembers or base housing residents experience the onset of physical or mental ailments, or disabilities caused or suspected to be caused by negligent property maintenance and management. Furthermore, the Committee directs DOD and the Services to establish and maintain procedures for tenant reporting of safety and health threats in military family housing managed by private contractors, that include the following: (1) active outreach on how to file a complaint or make a maintenance request, (2) a record-keeping and reporting system of housing complaints and maintenance requests that are reviewable by Department leadership and available to Members of Congress upon request, and (3) provide the annual reports regarding the status of remediation requests and efforts acted upon by private contractors, and should be reviewable by base commanders, DOD leadership, and submitted to the congressional defense committees annually.

Tenant Rights.—The Committee is aware that DOD is creating a process to assist servicemembers with their tenant rights while living in base housing, and simultaneously renegotiating department leases with private housing providers. The Committee directs

the Department to provide a report no later than 60 days after enactment of this Act, and then every quarter, regarding the status of the tenant contracts, leases with private housing providers and overall implementation measures that were taken to improve quality of housing for servicemembers.

Foreign Currency Savings and Sub-Account Transfers.—The Committee directs that savings in family housing operation and maintenance accounts from foreign currency re-estimates be used to maintain and repair existing family housing units. The Comptroller is directed to report to the Committees on Appropriations of both Houses of Congress on how these savings are allocated 90 days after enactment of this Act. In addition, the Committee directs the Services and Defense agencies to notify the Committees on Appropriations of both Houses of Congress within 30 days of a transfer of funds between sub-accounts within the family housing construction and family housing operation and maintenance accounts, if such transfer is in excess of 10 percent of the funds appropriated to the sub-account to which the funds are being transferred. Notifications to the Committees shall indicate the sub-accounts and amounts that are being used to source the transfer.

Leasing Reporting Requirements.—The Secretary of Defense is directed to report to the Committees on Appropriations of both Houses of Congress quarterly on the details of all new or renewed domestic leases entered into during the previous quarter that exceeds the cost threshold set by 10 U.S.C. 2828(b)(2), including certification that less expensive housing was not available for lease. For foreign leases, the Department is directed to (1) perform an economic analysis on all new leases or lease/contract agreements where more than 25 units are involved; (2) report the details of new or renewed lease agreements that exceed the cost threshold set by 10 U.S.C. 2828(e)(1) 21 days before entering into such an agreement; and (3) base leasing decisions on the economic analysis.

FAMILY HOUSING CONSTRUCTION, ARMY

Fiscal year 2019 enacted level	$330,660,000
Fiscal year 2020 budget request	141,372,000
Committee recommendation in the bill	141,372,000
Comparison with:	
Fiscal year 2019 enacted level	(189,288,000)
Fiscal year 2020 budget request	– – –

FAMILY HOUSING OPERATION AND MAINTENANCE, ARMY

Fiscal year 2019 enacted level	$376,509,000
Fiscal year 2020 budget request	357,907,000
Committee recommendation in the bill	407,907,000
Comparison with:	
Fiscal year 2019 enacted level	31,398,000
Fiscal year 2020 budget request	50,000,000

FAMILY HOUSING CONSTRUCTION, NAVY AND MARINE CORPS

Fiscal year 2019 enacted level	$104,581,000
Fiscal year 2020 budget request	47,661,000
Committee recommendation in the bill	47,661,000
Comparison with:	
Fiscal year 2019 enacted level	(56,920,000)
Fiscal year 2020 budget request	– – –

FAMILY HOUSING OPERATION AND MAINTENANCE, NAVY AND MARINE CORPS

Fiscal year 2019 enacted level	$314,536,000
Fiscal year 2020 budget request	317,870,000
Committee recommendation in the bill	377,470,000
Comparison with:	
Fiscal year 2019 enacted level	62,934,000
Fiscal year 2020 budget request	59,600,000

FAMILY HOUSING CONSTRUCTION, AIR FORCE

Fiscal year 2019 enacted level	$78,446,000
Fiscal year 2020 budget request	103,631,000
Committee recommendation in the bill	103,631,000
Comparison with:	
Fiscal year 2019 enacted level	25,185,000
Fiscal year 2020 budget request	– – –

FAMILY HOUSING OPERATION AND MAINTENANCE, AIR FORCE

Fiscal year 2019 enacted level	$317,274,000
Fiscal year 2020 budget request	295,016,000
Committee recommendation in the bill	326,216,000
Comparison with:	
Fiscal year 2019 enacted level	8,942,000
Fiscal year 2020 budget request	31,200,000

FAMILY HOUSING OPERATION AND MAINTENANCE, DEFENSE-WIDE

Fiscal year 2019 enacted level	$58,373,000
Fiscal year 2020 budget request	57,000,000
Committee recommendation in the bill	57,000,000
Comparison with:	
Fiscal year 2019 enacted level	(1,373,000)
Fiscal year 2020 budget request	– – –

DEPARTMENT OF DEFENSE FAMILY HOUSING IMPROVEMENT FUND

Fiscal year 2019 enacted level	$1,653,000
Fiscal year 2020 budget request	3,045,000
Committee recommendation in the bill	3,045,000
Comparison with:	
Fiscal year 2019 enacted level	1,392,000
Fiscal year 2020 budget request	– – –

DEPARTMENT OF DEFENSE MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND

Fiscal year 2019 enacted level	$600,000
Fiscal year 2020 budget request	500,000
Committee recommendation in the bill	500,000
Comparison with:	
Fiscal year 2019 enacted level	(100,000)
Fiscal year 2020 budget request	– – –

Administrative Provisions

The bill retains 27 provisions that were in effect in fiscal year 2019. The administrative provisions included in the bill are as follows:

The bill includes section 101 prohibiting the use of funds for payments under a cost-plus-a-fixed-fee contract for construction where cost estimates exceed $25,000. An exception for Alaska is provided.

The bill includes section 102 permitting the use of construction funds for the hire of passenger motor vehicles.

The bill includes section 103 permitting funds to be expended on the construction of defense access roads under certain circumstances.

The bill includes section 104 prohibiting construction of new bases in the United States without a specific appropriation.

The bill includes section 105 limiting the use of funds for the purchase of land or land easements that exceed 100 percent of value except under certain conditions.

The bill includes section 106 prohibiting the use of funds to acquire land, prepare sites, or install utilities for family housing except housing for which funds have been appropriated.

The bill includes section 107 limiting the use of minor construction funds to relocate any activity from one installation to another without prior notification.

The bill includes section 108 prohibiting the procurement of steel unless American producers, fabricators, and manufacturers have been allowed to compete.

The bill includes section 109 prohibiting the use of funds to pay real property taxes in foreign nations.

The bill includes section 110 prohibiting the use of funds to initiate a new installation overseas without prior notification.

The bill includes section 111 establishing a preference for United States architectural and engineering services where the services are in Japan, NATO member countries, or countries bordering the Arabian Sea.

The bill includes section 112 establishing a preference for United States contractors for military construction in the United States territories and possessions in the Pacific and on Kwajalein Atoll, or countries within the Central Command area of responsibility, except bids by Marshallese contractors for military construction on Kwajalein Atoll.

The bill includes section 113 requiring the Secretary of Defense to give prior notice to Congress of military exercises where construction costs exceed $100,000.

The bill includes section 114 allowing funds appropriated in prior years to be used for new projects authorized during the current session of Congress.

The bill includes section 115 allowing the use of expired or lapsed funds to pay the cost of supervision for any project being completed with lapsed funds.

The bill includes section 116 providing that funds for military construction projects are available until the end of the fourth fiscal year following the fiscal year in which funds are appropriated, subject to certain conditions.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 117 allowing for the transfer of funds from Family Housing Construction accounts to the Department of Defense Family Housing Improvement Fund and funds from Military Construction accounts to the Department of Defense Military Unaccompanied Housing Improvement Fund.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 118 providing transfer authority to the Homeowners Assistance Program.

The bill includes section 119 requiring that funds in this title be the sole source of all operation and maintenance for flag and general officer quarter houses and limits the repair on these quarters to $15,000 per year without notification.

The bill includes section 120 making funds in the Ford Island Improvement Fund available until expended.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 121 allowing the transfer of expired funds to the "Foreign Currency Fluctuations, Construction, Defense" account.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 122 allowing the transfer of funds among projects and activities in accordance with the reprogramming guidelines.

The bill includes section 123 prohibiting the use of funds for projects at Arlington National Cemetery.

The bill includes section 124 providing additional funds for various military construction accounts and requires a spend plan for each.

(RESCISSION OF FUNDS)

The bill includes section 125 rescinding funds from prior appropriations Acts.

The bill includes section 126 defining the congressional defense committees.

The bill includes section 127 directing all amounts appropriated to Military Construction (all accounts) be immediately available and allotted for the full scope of the authorized project.

TITLE II

DEPARTMENT OF VETERANS AFFAIRS

Fiscal year 2019 enacted level [1] (Including one rescission)	$197,190,593,000
Fiscal year 2020 budget request [1]	216,148,394,000
Committee recommendation in the bill [1] (Including one rescission)	217,467,894,000
Comparison with:	
Fiscal year 2019 enacted	20,277,301,000
Fiscal year 2020 budget request	1,319,500,000
Fiscal year 2021 advance budget request	217,146,155,000
Fiscal year 2021 Committee recommendation in the bill	217,146,155,000

[1] All funding cited excludes amounts in the Medical Care Collections Fund.

The Department of Veterans Affairs (VA) serves approximately 41,350,000 people—19,500,000 Veterans and 23,900,000 family members and dependents who may be eligible for certain VA benefits. To serve adequately the Nation's Veterans, VA employs more than 377,000 people, making it one of the largest federal agencies in terms of employment.

VETERANS BENEFITS ADMINISTRATION (VBA)

COMPENSATION AND PENSIONS

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2020 enacted level	$109,017,152,000
Fiscal year 2021 advance budget request	116,801,316,000
Fiscal year 2021 Committee recommendation in the bill	116,801,316,000
Comparison with:	
Fiscal year 2020 enacted level	7,784,164,000
Fiscal year 2021 budget request	– – –

This appropriation will provide funds for service-connected compensation payments to an estimated 5,477,000 Veterans, survivors, and dependents in 2020. In addition, pension payments will be funded for 444,000 Veterans and their survivors. The average payment per compensation case for Veterans in 2020 is estimated at $18,883 and pension payments are projected at $13,619.

The appropriation includes authority to transfer funding not to exceed $18,147,000 in 2021 to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems. These funds are for the administrative expenses of implementing cost-saving provisions required by the Omnibus Budget Reconciliation Act of 1990 (P.L. 101–508), the Veterans' Benefits Act of 1992 (P.L. 102–568), and the Veterans' Benefits Improvements Act of 1994 (P.L. 103–446). These cost-saving provisions include verifying pension income against Internal Revenue Service (IRS) and Social Security Administration (SSA) data; establishing a match with SSA to obtain verification of Social Security numbers; and applying the VA pension cap for Medicaid-eligible single Veterans and surviving spouses alone in Medicaid-covered nursing homes. The bill also continues to include language permitting this appropriation to reimburse such sums as may be earned to the Medical Care Collections Fund to help defray the operating expenses of individual medical facilities for nursing home care provided to pensioners.

Performance Measures.—Based on the findings of the Government Accountability Office (GAO) report entitled, "Better Measures Needed to Assess Regional Office Performance in Processing Claims" (GAO 19–15), the Committee directs the Under Secretary for Benefits to: (1) implement a new measure to assess regional offices' performance and accuracy to better target resources to low-performing offices; (2) clarify how Veterans Services Representatives should handle claims when they identify an error; (3) evaluate its policy for regional office communication with Veterans Service Organizations (VSOs) to ensure that it is clear, that it aligns with practice, and that it meets the communication needs of VSOs; and (4) develop and implement a mechanism to obtain periodic feedback from congressional caseworkers on their communication with regional offices regarding claims and needed information or support. The Committee requests a report on the Department's efforts no later than 60 days after enactment of this Act.

Pro-bono Legal Services.—The Committee recognizes an unmet need for holistic programs that offer pro-bono legal services to Veterans and their dependents. The Committee acknowledges existing VA initiatives that guide Veterans during benefit-related interactions with administrative agencies and believes that public land-

grant university law schools are suited to complement existing agency efforts in underserved areas.

READJUSTMENT BENEFITS

Fiscal year 2020 enacted level	$14,065,282,000
Fiscal year 2021 advance budget request	12,578,965,000
Fiscal year 2021 Committee recommendation in the bill	12,578,965,000
Comparison with:	
Fiscal year 2020 enacted level	(1,486,317,000)
Fiscal year 2021 budget request	– – –

This appropriation finances the education and training of Veterans and servicemembers through the Post-9/11 GI Bill and the All-Volunteer Force Educational Assistance Program. Supplemental education benefits are also provided to certain Veteran members of the Selected Reserve and are funded through transfers from DOD. In addition, certain disabled Veterans are provided with vocational rehabilitation, specially adapted housing grants, and grants for automobiles with approved adaptive equipment. This account also finances educational assistance allowances for eligible dependents of Veterans who died from service-connected causes or have a total and permanent service-connected disability, as well as dependents of servicemembers who were captured or are missing in action. Almost 80 percent of the funds in the account support the Post-9/11 GI Bill.

VetSuccess on Campus (VSOC).—The Committee recognizes the tremendous value of counseling in assisting the transition of Veterans from military service to academic life. Therefore, the Committee encourages VBA to continue to expand the availability of services through the VSOC program to additional sites, with particular attention to geographic regions without current access to VSOC programs.

Transition Coordination.—The Committee believes that VA, in consultation with the Departments of Labor and Defense, should further coordinate efforts and resources to ensure Veterans have a successful transition to civilian life. This includes sharing information on community resources, including nonprofits and VSOs, that are available to the Veteran and their family as they depart the service. The Committee also urges the Secretary to use the Veteran treatment courts system to educate Veterans on job training and small business services offered by the Department (and in partnership with the Small Business Administration and the Department of Labor).

Gender-Specific Women Veteran Case Management.—The Committee recognizes traditional Veteran services were primarily designed for men and do not always meet the needs of women Veterans. Women Veterans struggling with the acclimation to civilian and community life often find themselves in at-risk circumstances that may differ from those of men, and therefore women Veterans require specialized interventions and programming. The Committee encourages the Department to work with the Department of Defense and the Department of Labor to provide robust gender-specific case management services for women Veterans transitioning from military service.

VETERANS INSURANCE AND INDEMNITIES

Fiscal year 2020 enacted level	$111,340,000
Fiscal year 2020 budget year request	17,620,000
Fiscal year 2020 budget year Committee recommendation in the bill	17,620,000
Fiscal year 2021 advance budget request	129,224,000
Fiscal year 2021 Committee recommendation in the bill	129,224,000
Comparison with:	
Fiscal year 2020 enacted level	17,884,000
Fiscal year 2021 budget request	– – –

The Veterans Insurance and Indemnities appropriation is made up of the former appropriations for military and naval insurance, applicable to World War I Veterans; national service life insurance (NSLI), applicable to certain World War II Veterans; servicemember's indemnities, applicable to Korean conflict Veterans; and Veterans mortgage life insurance, applicable to individuals who have received a grant for specially adapted housing.

The amount provided will enable the Department to transfer funding to the service-disabled Veterans insurance fund and transfer additional amounts for payments for policies under the Veterans mortgage life insurance program. These policies are identified under the Veterans Insurance and Indemnities appropriation since they provide insurance to service-disabled Veterans unable to qualify under basic NSLI.

VETERANS HOUSING BENEFIT PROGRAM FUND PROGRAM ACCOUNT

	Program account	Limitation on direct loans for specially adapted housing loans	Administrative expenses
Fiscal year 2019 enacted level	– – –	($500,000)	$200,612,000
Fiscal year 2020 budget request est.	– – –	(500,000)	200,377,391
Committee recommendation est. in the bill	– – –	(500,000)	200,377,391
Comparison with:			
Fiscal year 2019 enacted level	– – –	– – –	(234,609)
Fiscal year 2020 budget request	– – –	– – –	– – –

The purpose of the home loan guaranty program is to facilitate the extension of mortgage credit on favorable terms by private lenders to eligible Veterans. This appropriation provides for all costs, with the exception of the Native American Veterans housing loan program, of the Department's direct and guaranteed loans programs. The Federal Credit Reform Act of 1990 (P.L. 101–508) requires budgetary resources to be available prior to incurring a direct loan obligation or a loan guaranty commitment. In addition, the bill requires all administrative expenses of a direct or guaranteed loan program to be funded through a program account. Loan guaranties are made to servicemembers, Veterans, reservists, and single surviving spouses for the purchase of homes, condominiums, and manufactured homes and for refinancing loans. The Department guarantees part of the total loan, permitting the purchaser to obtain a mortgage with a competitive interest rate, even without a down payment if the lender agrees. The Department requires that a down payment be made for a manufactured home. With a Department guaranty, the lender is protected against loss, up to the amount of the guaranty, if the borrower fails to repay the loan.

Home Loan Income Verification.—The Committee is aware of the Department's denial of home loan guarantees to Veterans solely on the basis of the Veteran's documented income being derived from state-legalized cannabis activities. The Committee is concerned that the Department has never publicly stated its position on this matter, hindering Veterans' ability to fully understand and consider how employment decisions could affect future eligibility for earned benefits. The Committee therefore directs VA to publicly clarify its position on this matter no later than 180 days after the enactment of this Act.

Home Loan Utilization.—The Committee notes with concern that Veterans significantly under-utilize their available Home Loan Benefit from the Department of Veterans Affairs. Therefore, VA is directed to provide a report no later than 180 days after enactment of this Act determining the reasons for this under-utilization, along with recommendations to improve its use and effectiveness.

VOCATIONAL REHABILITATION LOANS PROGRAM ACCOUNT

	Program account	Limitation on direct loans	Administrative expenses
Fiscal year 2019 enacted level	$39,000	($2,037,000)	$396,000
Fiscal year 2020 budget request	57,729	(2,008,232)	401,880
Committee recommendation in the bill	57,729	(2,008,232)	401,880
Comparison with:			
Fiscal year 2019 enacted level	18,729	(28,768)	5,880
Fiscal year 2020 budget request	– – –	– – –	– – –

This appropriation covers the subsidy cost of direct loans for vocational rehabilitation of eligible Veterans and includes administrative expenses necessary to carry out the direct loan program. Loans of up to $1,260 (based on indexed chapter 31 subsistence allowance rate) are available to service-connected disabled Veterans enrolled in vocational rehabilitation programs when the Veteran is temporarily in need of additional assistance. Repayment is made in monthly installments, without interest, through deductions from future payments of compensation, pension, subsistence allowance, educational assistance allowance, or retirement pay. Most loans are repaid in full in less than one year. The Federal Credit Reform Act of 1990 (P.L. 101–508) requires budgetary resources to be available prior to incurring a direct loan obligation.

It is estimated that the Department will make 1,970 loans in fiscal year 2020, with an average amount of $1,019.

NATIVE AMERICAN VETERAN HOUSING LOAN PROGRAM

Administrative expenses:	
Fiscal year 2019 enacted level	$1,163,000
Fiscal year 2020 budget request	1,163,000
Committee recommendation in the bill	1,186,000
Comparison with:	
Fiscal year 2019 enacted level	23,000
Fiscal year 2020 budget request	23,000

The Native American Veteran Housing Loan Program, as authorized by title 38 United States Code, chapter 37, subchapter V, provides the Secretary with authority to make direct housing loans to Native American Veterans for the purpose of purchasing, constructing, or improving dwellings on trust lands, including Hawaiian Home Lands. Native Hawaiians, Alaska Natives, and Native

Americans enroll in the military at higher rates than non-Natives. These loans are available to purchase, construct, or improve homes to be occupied as Veterans' residences.

GENERAL OPERATING EXPENSES, VETERANS BENEFITS ADMINISTRATION

Fiscal year 2019 enacted level	$2,956,316,000
Fiscal year 2020 budget request	3,000,000,000
Committee recommendation in the bill	3,025,000,000
Comparison with:	
Fiscal year 2019 enacted level	68,684,000
Fiscal year 2020 budget request	25,000,000

The General Operating Expenses, Veterans Benefits Administration account provides funding for VBA to administer entitlement programs such as service-connected disability compensation, education benefits, and vocational rehabilitation services.

The bill makes available through September 30, 2021, up to ten percent of these funds.

The Committee provides $3,025,000,000 for the General Operating Expenses, VBA account, which is $25,000,000 above the Administration request. The Committee provides these additional funds for hiring additional claims and appellate staff, digital scanning of health records, and overtime pay.

Equitable Relief.—The Committee reiterates that it understands VA is working to implement new systems and protocols to eliminate instances of administrative error. However, as VA enacts system-wide reforms, ending equitable relief for Veterans who were deemed eligible for benefits in error would place an unfair burden on Veterans and their families. The Secretary is directed to continue to grant or extend equitable relief to eligible Veterans initially deemed eligible in instances of administrative error. Not later than April 1, 2020, the Secretary shall submit to the Committees a report containing a statement as to the disposition of each case recommended to the Secretary for equitable relief under 38 U.S.C 503 during the preceding calendar year.

Military Sexual Trauma (MST) claims.—The 2018 Inspector General's report that found that almost half of denied MST-related claims were not properly adjudicated in accordance with VBA policies. The Committee is concerned that efforts to address the massive claim backlog caused VBA leadership to lose focus regarding these sensitive claims, abandoning appropriate and ongoing training, case audits, and specialized processors for MST-related claims. The Committee directs VA to report to the Committee by October 31, 2019, on implementation of the Inspector General's recommendations, and to consult with the Committee prior to any changes in the system for handling MST-related claims. The Committee is concerned that Veterans suffering from a mental health disorder as a result of sexual trauma during service have different standards of evidence based on their diagnosis. The Committee recognizes that evidence in personnel files is rare, no matter the resulting condition following MST, therefore, the Committee urges VA to support the extension of the relaxed evidentiary standard to all those suffering from mental health disorders as a result of MST. Further, the Committee urges VA to continue to report to Congress on information relating to claims for disabilities incurred or aggravated by MST, as provided by section 113 of the Jeff Miller and

Richard Blumenthal Veterans Health Care and Benefits Improvement Act of 2016 (P.L. 114–315).

Transition Assistance.—The Committee is aware of VA's efforts to expand Veterans education connection centers at medical centers and outpatient clinics, such as the one established at the Louis Stokes Veterans Medical Center in Cleveland, Ohio. As directed in fiscal year 2019, the Committee continues to encourage VA to explore opportunities for education connection centers at VA Medical Centers with a high need. Furthermore, the Committee directs VA to provide the Committee with a report detailing: (1) the current education connection centers project, (2) an explanation of how the center currently benefits Veterans it serves and, (3) its potential plans to expand the number of education connection centers. In addition, this report should include an action plan with a detailed timeline for possible further expansion to one education connection center in at least ten of the 21 Veterans Integration Service Networks (VISN) within the next three years, projected timelines for implementation of this expansion effort, an analysis of projected added benefit to Veterans under the expansion, as well as potential funding costs and needs. The fiscal year 2019 report has not yet been submitted to the Committee, thus the Committee requires VA to provide a briefing to the Committee no later than 30 days after enactment of this Act on how they will produce this report in a timely manner.

Outreach to Remote Locations.—The Committee directs VBA to improve access and outreach to Veterans living in remote and underserved areas, such as the Commonwealth of the Northern Mariana Islands, by increasing staff presence in these areas. Veterans living in these areas, particularly elderly and disabled Veterans who may have difficulty accessing VBA services via the internet or phone, should have an opportunity to speak and obtain assistance, in-person, with VBA staff.

Weatherization and Other Benefits.—The Committee recognizes the importance of housing stability for Veterans and encourages VA to increase its outreach efforts to make Veterans aware of the Department of Energy's Weatherization Assistance Program, Department of Housing and Urban Development grants, and similar programs in conjunction with existing Veterans Benefit Administration programs as Veterans start the claims submission process. The Committee urges VA to take steps to inform Veterans about benefits beyond traditional Veterans benefits and incorporate this information into education and outreach materials when Veterans utilize the VA Home Loan program or housing assistance programs.

GI Bill Benefits.—The Committee recognizes the GI Bill is an earned benefit from service with limits, so it is critical Veterans have the information they need to make informed decisions. They need better information not just on colleges, but on outcomes of the programs that will prepare them well for their civilian careers. Currently, all public Federal databases lack program level data that would allow potential students to compare the outcomes of specific programs across institutions. Therefore, the Committee encourages VA to work with other Federal agencies and the private sector to provide program level information on Veterans on the GI Bill Comparison Tool or other Federal databases including, but not

limited to, graduation rates, total cost, time to completion, and percent of graduates employed in the field and post-graduate salaries. Providing such information would empower Veterans to choose both the college and program that is best for them by considering outcomes of other Veterans in the specific programs they are considering.

VETERANS HEALTH ADMINISTRATION (VHA)

The Department operates the largest Federal medical care delivery system in the country, with 143 hospitals, 119 residential rehabilitation treatment programs, 134 nursing homes, 300 Vet Centers, 80 mobile Vet Centers, and 728 outpatient clinics. Approximately 7,000,000 patients will be treated in 2020.

The Veterans Health Administration budget is comprised of five accounts: Medical Services, Medical Community Care, Medical Support and Compliance, Medical Facilities, and Medical and Prosthetic Research. For the first four accounts, the Administration has requested total resources for fiscal year 2021 of $87,636,650,000 in direct appropriations to fund the four advance appropriations of the VHA. The Committee provides an additional $4,809,360,000 for the first four accounts for fiscal year 2020, which is $189,160,000 over the budget request. In addition, VA will receive an estimated $3,912,000,000 in the Medical Care Collections Fund in fiscal year 2020. The Committee also provides $840,000,000 for medical and prosthetic research.

MEDICAL SERVICES

Fiscal year 2019 enacted level	$49,911,165,000
Fiscal year 2020 enacted level	51,411,165,000
Fiscal year 2020 budget year request	– – –
Committee 2020 budget year recommendation	169,160,000
Fiscal year 2021 advance appropriation request	56,158,015,000
Committee 2021 advance appropriation recommendation	56,158,015,000
Comparison with:	
Fiscal year 2020 enacted level	4,746,850,000
Fiscal year 2021 budget request	– – –

This appropriation provides for medical services of eligible Veterans and beneficiaries in Department medical centers, outpatient clinic facilities, contract hospitals, State homes, and outpatient programs on a fee basis. VA also supports hospital and outpatient care through the private sector for certain dependents and survivors of Veterans under DOD civilian health and medical programs.

The bill provides the request of $56,158,015,000 for advance fiscal year 2021 funding. The Committee has included bill language to make available through September 30, 2022, $1,500,000,000 of the Medical Services advance appropriation for fiscal year 2021. The Committee provides an additional $169,160,000 to be available for fiscal year 2020; of which $35,000,000 shall be for gender-specific care for women; $30,000,000 shall be for suicide prevention, $20,000,000 shall be for Whole Health initiatives; $40,000,000 shall be for homelessness initiatives; $17,000,000 shall be for other initiatives specified by the Committee; and $27,160,000 shall be to reimburse the Medical Care account for the April 2019 reprogramming to the Information Technology (IT) Systems account to support the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Inte-

grated Outside Networks (MISSION) Act of 2018 (P.L. 115–182) implementation. The Committee directs that as of the date of enactment of this Act, all reprogramming requests from the Department to the Committees on Appropriations of both Houses of Congress to support the MISSION Act may come from the Medical Community Care account only, and not from the Medical Services account.

Changes in Funding Requirements Due to Modeling.—The Committee expects VA to continue to include in the sufficiency letter required by section 117(d) of title 38, United States Code, which is due to the Congress on July 31 of each year, a description of any changes exceeding $250,000,000 in funding requirements for the Medical Services account resulting from the spring recalculation of the Enrollee Healthcare Projection Model.

Caregivers Program.—The caregivers program provides an unprecedented level of benefits to families with Veterans seriously injured in the line of duty in post-9/11 service. These benefits include stipends paid directly to the family caregiver, enrollment for the family member in the VA Civilian Health and Medical Program (CHAMPVA), an expanded respite benefit, and mental health treatment. The Committee provides the request of $705,219,000 for the caregivers. The Committee also continues the requirement from the fiscal year 2018 conference report on quarterly reporting on obligations for the caregivers program.

Allocation of Health Funding.—The Committee continues to be concerned that the process VA uses to allocate the health services appropriation through the VISNs and from them to the medical centers may shortchange the ultimate users because of excessive funding retained at headquarters or at the VISNs. The Committee continues to request a report each year, no later than 30 days after VA allocates the medical services appropriation to the VISNs, that identifies: (1) the amount of general purpose funding that is allocated to each VISN; (2) the amount of funding that is retained by central headquarters for specific purposes, with amounts identified for each purpose; and (3) the amount of funding that is retained by each VISN before allocating it to the medical centers, identifying separately the amounts retained for purposes such as network operations, network initiatives, and emergencies.

MENTAL HEALTH

The Committee provides $9,452,633,000 for mental health programs, which is $30,000,000 above the budget request. Of the amounts provided for mental health programs in fiscal year 2020, $1,526,059,000 shall be used for suicide prevention and treatment programs. Specifically, $221,764,000 shall be used for suicide prevention outreach. With the additional funds, the Committee directs the Department to implement suicide safety plans that address parking lot suicides and expand the Coaching Into Care Program to better help Veterans, their family members, and other loved ones find the appropriate services at their local VA facilities and/or in their community. The Department should also engage with VSOs to help remove the stigma that is associated with seeking mental healthcare. Furthermore, VA is directed to remove barriers that impact a Veteran when trying to receive mental healthcare. The Committee also directs VA to implement a twenty-first century

outreach program that incorporates social media and other electronic means to reach Veterans before they are at a crisis point.

In addition, the Committee directs VA to engage with DOD to help servicemembers transition from active duty to civilian life to ensure that mental health needs are addressed throughout the transition process. The Department is directed to provide a report to the Committee, no later than 90 days after enactment of this Act, identifying a detailed expenditure plan for all suicide outreach and treatment programs and how VA is meeting the Committee's directives.

Mental Health Services.—Women Veterans are twice as likely to commit suicide than women in the general population. To address this alarming trend, the Committee directs VA to take aggressive steps to improve mental health services for women Veterans and ensure that women's mental health needs, which often differ from men in prevalence and expression, are met.

PREVENTS Initiative.—The Committee is aware of efforts to coordinate Veteran suicide prevention efforts under the Presidential Task Force established under the PREVENTS Initiative. A primary focus of these efforts is to engender collaboration across public and private sectors to end the national tragedy of suicide, including the use of public-private partnerships. This is a strategy the Committee has supported and believes vital to address critical mental health issues in our Veteran population. VA has awarded grants as part of an existing public-private pilot program in six states and the District of Columbia to address the causes and contributing factors that lead to suicides among our Veteran populations. Because firearms were used in nearly 70 percent of all Veteran suicide deaths, an important focus of the pilot program includes the safe storage of firearms. The Committee provides an additional $3,000,000 above the request to continue and broaden this initiative.

Post-traumatic Growth Programs.—The Committee recognizes there is a shortage of adequate, timely, and effective mental health care available to Veterans across the United States. As the Department continues to highlight Veterans' mental healthcare and suicide prevention as a key priority, there is an opportunity to explore effective alternative treatments focused on the area of post-traumatic growth. The Committee encourages the establishment of a pilot program to study the effectiveness and benefits of nonprofit post-traumatic growth programs to determine the outcomes of such programs in contrast to traditional models of mental healthcare, the possible integration of such nonprofit programs into mental healthcare programs provided by the Department, and the budgetary impacts of such integration. The Secretary shall submit a report no later than 180 days after enactment of this Act, detailing the feasibility of such a pilot program and the metrics required to determine the value of post-traumatic growth programs.

Improving the Veterans Crisis Line (VCL).—The Committee continues to monitor the VCL to ensure Veterans are receiving appropriate clinical care. To support this critical care, the Committee instructs the Secretary to ensure that Federal funding for the VCL is utilized to make any necessary improvements to VCL's operations in order to best meet the needs of Veterans seeking assistance. This includes, but is not limited to, ensuring appropriate

staffing for call centers and back-up centers, providing necessary training for VCL staff, and ensuring that staff are able to appropriately and effectively respond to the needs of Veterans needing assistance through the VCL.

The Committee has repeated bill language requiring the VCL to: (1) provide to individuals who contact the hotline immediate assistance from a trained professional; and (2) to adhere to all requirements of the American Association of Suicidology.

Community Clinic Mental Health Services.—The Committee remains concerned that in-person mental healthcare is not available to all Veterans who require this care. VA is encouraged to ensure critical in-person mental health services are available at facilities that currently are not served, even on a temporary basis.

Post-Traumatic Stress Disorder (PTSD) Service Dogs.—The Committee recognizes the positive role that service, guide, and hearing dogs have played in mitigating Veterans' disabilities and providing assistance and rehabilitation. The Energy and Water, Legislative Branch, and Military Construction and Veterans Affairs Appropriations Act, 2019 (P.L. 115–244) urged VA to prioritize support of veterinary healthcare and other benefits for service dogs for wounded warriors. The Committee also noted that VA is currently engaged in a study to assess the potential therapeutic effectiveness of service dogs in the treatment of PTSD and that the study will be completed in June 2019. The Committee is interested in the possibility of providing service dogs to Veterans with a mental health mobility disorder related to post-traumatic stress or traumatic brain injury. According to the Department of Veterans Affairs, as many as 20 percent of those who served in Iraq or Afghanistan are diagnosed with post-traumatic stress. This disorder can cause debilitating symptoms in Veterans, leading to depression, social isolation, and suicide. Studies demonstrate that service dogs provide support to Veterans by mitigating their disability, allowing for professional and social reintegration. Currently, waiting lists for service dogs average between 18 and 24 months, with intensive compulsory training costing an average of $25,000 per service dog, which makes this an expensive option for Veterans. The Committee looks forward to this study and will address this issue as the bill moves through the process.

Public-Private Partnerships.—The Committee is concerned by the alarming number of suicides committed by Veterans each day. While the Committee appreciates the important work being done by the Department to combat suicide and improve mental health among Veterans, more can and must be done. The Committee recommends the Department actively seek out public-private partnerships, in particular with research universities, teaching hospitals, and other partners, to expand upon its existing efforts related to suicide prevention, PTSD, traumatic brain injury (TBI), and substance use disorders. The Secretary shall report to the Committee no later than 60 days after enactment of this Act on the status of creating public-private partnerships related to suicide prevention, PTSD, TBI, and substance use disorders. Of the funds appropriated for mental health programs in fiscal year 2020, no less than $5,000,000 shall be appropriated to expand the public-private partnerships.

Law Enforcement Liaison.—The Committee appreciates VHA's past efforts in working to educate the law enforcement community regarding the unique issues facing Veterans, especially those returning from combat operations. Such education is invaluable in cases where Veterans are determined to be an immediate threat to themselves or others. In such instances, it is imperative that the Veteran's needs be addressed in an expeditious, humane, and respectful manner. The Committee, therefore, directs VA to implement a program that would designate a VA liaison to work with local law enforcement to address such circumstances and to submit a report to the Committees on Appropriations of both Houses of Congress detailing its efforts no later than 60 days after enactment of this Act.

Non-Citizen Veteran Outreach.—The Committee is concerned about the level of awareness regarding mental health services by at-risk, non-citizen Veterans. The Committee therefore urges VA to conduct more aggressive outreach targeting this group of Veterans to offer mental health and other early intervention services, drug and alcohol services, and mental health counseling, and directs the Department to submit a report to Congress no later than 60 days after the enactment of this Act.

Cultural Competency Training.—The Committee welcomes the Secretary's commitment to addressing mental health in the Veteran population. The Committee also recognizes the importance of the National Center for PTSD at VA in promoting better prevention, diagnoses, and treatment of PTSD. Consistent with findings from the VA National Center for PTSD, the Committee recognizes that some groups of Veterans, including African-Americans and Latinos, are more likely to develop PTSD. As such, the Committee directs the Veterans Health Administration in coordination with the VA National Center for PTSD to provide a report no later than 180 days after enactment of this Act detailing whether cultural competency training is provided to healthcare professionals serving Veterans of color, and at what stage(s) in their career; and analyzing whether minority Veterans receive quality and culturally appropriate care. This report shall also include recommendations on how to address the unique mental health needs of minority Veterans, and disparities, whether perceived or real, in the care they receive.

National Academies of Sciences.—A survey conducted by the National Academies of Sciences, Engineering, and Medicine in 2017 found that while the Department of Veterans Affairs provides mental healthcare to Veterans of the Iraq and Afghanistan Wars of comparable or superior quality to other providers, substantial needs remain unmet. The Committee strongly encourages the implementation of the Academy's recommendations, including the development of a comprehensive five-year strategic plan for mental health services. Moreover, the plan should address how VA will become a high-reliability organization that provides accessible, high-quality, and integrated mental healthcare services while also providing explicit attention to the unique needs of women Veterans within the VA system.

Adverse Childhood Experiences (ACEs).—ACEs exist within the Veterans population at a substantially higher rate than the general public. These experiences correlate with significant negative health

outcomes, including on behavioral, mental and physical health. The Committee encourages VA to track ACEs among Veterans and target individualized treatment. To ensure appropriate treatment from the moment a Veteran enters VA, it is critical that VA coordinate with the Department of Defense to obtain information on ACEs from servicemembers and provide a seamless transition in care.

Mental Health Pilot Program.—The Committee urges VA to implement a comprehensive medication selection, adherence, compliance and digital education pilot program for Veterans suffering from mental health issues, including PTSD and the long-term side-effects of increased exposure to TBI, through the utilization of cutting-edge, off-the-shelf technology and pharmacy management protocols to reduce suicide, relapse and hospital visits.

Agritherapy.—An increasing number of States now have programs that assist Veterans in starting farms, and many Veterans turning to farming suffer from PTSD. The benefits of agritherapy have been reported in the news media; however, limited research and insufficient opportunities exist to offer the benefits of agritherapy to those suffering from PTSD. The Department is encouraged to work with the Department of Agriculture on providing agritherapy programs to Veterans.

Mental Health Data on Asian Pacific American Veterans.—The Committee recognizes the lack of mental health data specific to Asian Pacific American Veterans. The Committee directs the Department to submit a report within 90 days after enactment of this Act on its data collection efforts.

SUICIDE PREVENTION OUTREACH

The Committee remains concerned that 14 of the 20 Veterans who commit suicide each day are not using VA services. The Committee urges VA to develop and implement a strategy to conduct outreach to this Veteran population and report to the House Committee on Appropriations 90 days after enactment of this Act.

VetsCorps.—Existing suicide prevention efforts are failing to reach the majority of Veterans in need. The Committee directs the Department to create a pilot program, carried out over a two-year period, establishing a VetsCorps. This Corps, comprised of Veterans themselves, will conduct outreach and recruitment to bring in Veterans who have not been served by the Department and connect them with available programs and services. The VetsCorps will be designed to reach Veterans wherever they are and provide a personal connection to VA.

Furthermore, the Committee encourages the Department to facilitate peer-to-peer Veteran support networks within VetsCorps for Veterans who are trained in suicide prevention and crisis intervention to help other Veterans transition from military service to civilian life. The pilot program shall be carried out at no fewer than six sites, targeted to regions with low rates of VA utilization and including at least one rural and one urban site. At the conclusion of the pilot program, the Department shall report to Congress on the effectiveness of the pilot program at reaching Veterans, particularly those in need, and increasing utilization of VA services and evaluate the cost-effectiveness of the program compared to ex-

isting outreach efforts. The Committee provides $5,000,000 for this pilot program.

Suicide Prevention Paid Media GAO Report.—The Committee is concerned with the findings of the GAO report entitled, "Improvements Needed in Suicide Prevention Media Outreach Campaign Oversight and Evaluation" (GAO–19–66), which found that VHA had only spent $57,000 of its $6,200,000 fiscal year 2018 budget for suicide prevention paid media as of September 2018. In accordance with the GAO report, the Committee recommends that the Office of Suicide Prevention and Mental Health (OSPMH) establish targets for its metrics to improve its evaluation of the effectiveness of its suicide prevention media outreach campaign. Further, the Committee directs that OSPMH provide the Committee with an expenditure plan on how it intends to effectively use fiscal year 2020 suicide prevention outreach funds no later than 30 days after enactment of this Act.

Social Media Contact.—The Committee recognizes the incidence of mental illness within the Veteran community, and the Committee encourages the Department to investigate the use of technology, specifically social media database algorithms, to detect and identify, via indirect contact such as social media, Veterans who are at risk of harming themselves or others. Once these individuals are identified, the Department would use indirect means of communication to interact with the troubled individual to provide help and support in the hope of preventing tragedy.

GRIT Suicide Prevention Mobile Application.—The Committee supports the Department's current efforts to use twenty-first century technology to promote social connectedness in order to prevent Veteran suicides. The Department, in collaboration with technology organizations, is developing mobile applications and online platforms in an effort to reach more Veterans, such as the Getting Results in Transition (GRIT) mobile application for transitioning servicemembers and Veterans. The Committee directs the Department to continue its efforts to work with technology organizations to develop and implement innovative platforms to prevent Veteran suicide.

HOMELESS ASSISTANCE

The Committee provides $1,858,534,000 for VA homeless assistance programs, an increase of $40,000,000 above the budget request. Additionally, an estimated $7,465,430,000 is provided for homeless Veterans treatment costs. These programs include the Homeless Providers Grant and Per Diem, the Domiciliary Care for Homeless Veterans, the Supportive Services for Low Income Veterans and Families, and the Department of Housing and Urban Development-Department of Veterans Affairs Supported Housing (HUD–VASH) programs. Within this total, the bill includes $380,000,000 for the Supportive Services to Veteran Families program.

Homeless Patient Aligned Care Teams (H–PACT) Expansion.—The Committee directs the Secretary to submit to the Committees on Appropriations of both Houses of Congress within 180 days of enactment of this Act a report on (1) the benefits of expanding the H–PACT program; (2) the expansion to additional locations, including rural areas; and (3) additional services to improve the program.

HUD–VASH Program.—The Committee continues to support the HUD–VASH program and reminds the Department to continue to provide the annual report on distribution of HUD–VASH vouchers as requested in House Report 115–188. Furthermore, the Committee requests that this annual report also identify how many HUD–VASH vouchers are given to women Veterans with children, women Veterans without children, male Veterans with children, and male Veterans without children in each State. The report should also include the number of HUD–VASH vouchers distributed to Veterans in rural, suburban, and urban areas per State. The Committee believes that an annual report with this information will be an important data point over time to assess the success of VA's efforts to combat Veteran homelessness.

HUD–VASH Case Management.—The Committee recognizes the value and impact of the HUD–VASH program, which serves Veterans experiencing homelessness. Case management services are critically important to the function of the program, and public housing authorities rely on VA Medical Centers referrals to house Veterans. Due to the joint nature of HUD–VASH funding, the Committee recommends that VA's budget for case managers be increased commensurate with any increases in HUD's budget for new vouchers.

Legal Assistance for the Supportive Services for Veteran Families (SSVF) Program.—The Committee notes that university law schools are willing to work with Veterans on a pro-bono basis to provide legal assistance. This can result in additional benefits such as training law students in Veteran disability law and legal skills critical to providing advocacy within the VA system and inspiring next-generation lawyers to serve Veterans in practice. The Committee encourages the SSVF program to work with grantees to expand their legal service offerings, particularly in rural areas where access to private legal assistance can be limited. Within funds provided, the Department is encouraged to establish one or more pilot projects to partner SSVF grantees with university law schools in rural areas to enhance legal assistance to Veterans.

Homeless Women Veterans.—The Committee is concerned with the growing number of women Veterans identified as homeless or unstably housed and strongly encourages the Department to complete an analysis of programs that provide assistance to women Veterans to identify the areas in which such programs are failing to meet the needs of such women. Therefore, no later than 180 days after enactment of this Act, the Committee directs the Department to submit a report on the analyses to the Committees on Appropriations of both Houses of Congress.

Homeless Veterans Near the United States-Mexico Border.—The Committee notes that there may be homeless Veterans living near the United States-Mexico border who, historically, may not have been counted in point-in-time homeless surveys. The Committee directs VA to work with HUD to develop strategies and recommendations for addressing Veteran homelessness near the United States-Mexico border and to take into account these undercounted Veterans when awarding HUD–VASH vouchers. The Committee appreciates VA's efforts to implement strategies and make recommendations to decrease Veteran homelessness on the border, such as the development of a Homelessness Screening Clinical Re-

minder, data sharing, improving the accuracy of data, and contracting case management in rural areas. The Committee directs VA to work with HUD to submit a report to Congress detailing the effectiveness of these measures in addressing Veteran homelessness on the United States-Mexico border no later than 60 days after enactment of this Act.

Underemployment of Veterans.—The Committee is encouraged by the historically low rates of unemployment and homelessness among Veterans. The Committee urges the Secretary to develop a strategy to address underemployment, which includes partnerships with non-governmental organizations, the private sector, and appropriate Federal agencies, which ensures that the job skills Veterans gain during active duty service are fully realized in professional workplaces.

STAFFING ISSUES

Mental Health Professionals Hiring.—The Committee recognizes the growing need for mental health professionals and in particular the need for mental health professionals at VA facilities. Therefore, the Committee directs the Department to prioritize hiring mental health professionals.

Medical Staff Retention.—The Committee expects VA to continue to report every six months on the number of all clinical staff directly responsible for patient care who have left VA, including a summary of the principal reasons explaining their departure, and the steps being taken to mitigate the principal reasons providers leave. The data should be aggregated at the VISN level and should also include the percentage of staff in primary care versus specialty care and mental health care, and the percentage of medical staff at each facility who complete an exit survey upon their departure. Exit surveys should be conducted anonymously, including through the use of a location that allows for privacy, is not directly visible by another employee, and does not require the departing employee to input any personally identifiable data. In addition, the Committee directs VA to submit a separate report, no later than 90 days after enactment of this Act, on efforts to recruit and hire medical officers and nurses within VHA, as well as any impediments to such efforts. The report should include the resources provided for these efforts and recommendations for relevant legislation.

Hiring and Credentialing.—The Committee is concerned if the VA hiring and credentialing process may contribute to longer wait times for Veterans seeking healthcare. The Committee requests VA to report on the average length of time to fill a healthcare provider slot at a representative sample of medical centers, including: the time it takes the resource board to approve the hire of a new position; the time it takes to post the job announcement; how long the interview process takes; and the length of time for credentialing; as well as any internal VA goals that exist for the time each step in the process should take. The report should also describe how often a healthcare provider reaches the credentialing process phase of the process, but exits the process because of another opportunity outside VA. This report should be provided to the Committee no later than 60 days after enactment of this Act.

Unfilled Positions.—The number of unfilled positions at VA has steadily grown and is at present nearly 49,000 system-wide. These

unfilled positions include VHA physicians and mental health professionals, and the lack of these professionals negatively impacts the delivery of care for Veterans at VHA medical centers and CBOCs across the country. VHA facilities have been forced to provide care with fewer staff than are medically necessary to properly care for our Nation's Veterans. As a result, The Committee is concerned that the significant number of vacancies will lead to longer waits for Veterans going without service. Section 505 of the MISSION Act required VA to post data on unfilled positions and the Committee expects VA to comply with this mandate. Therefore, the Committee expects VA to actively recruit and hire full-time professionals to fill these system-wide vacancies with the resources provided from the Committee. The Committee directs the Secretary of Veterans Affairs to provide a quarterly report to the Committees on Appropriations of both Houses of Congress detailing hiring initiatives and system-wide progress on hiring and specifically what actions are being taken to fill physician positions and mental health provider positions. Finally, the Committee directs the Secretary to include in this report an analysis of the amount of care and services carried out by non-Department facilities because of unfilled VA positions and how much money that has cost taxpayers.

ACCESS FOR RURAL VETERANS

Office of Rural Health (ORH).—The Committee provides $270,000,000 to improve access and quality of care for the more than 3,000,000 enrolled Veterans residing in rural and highly rural areas. ORH improves access and quality of care for enrolled Veterans residing in geographically rural areas. Developing evidence-based policies and innovative practices to bring healthcare to rural areas is key to serving Veterans in geographically remote areas, including remote facilities in Hawaii, many of whom would otherwise need to travel by air to reach their nearest VA facility. In addition to providing healthcare services, ORH's important work includes identifying barriers to healthcare delivery in rural areas and implementing new ways to deliver healthcare and services to Veterans in these locations.

Operating Plan.—The Committee directs the Office of Rural Health to submit to the Committee no later than 30 days after enactment of this Act an operating plan for fiscal year 2020 funding, as well as the fiscal year 2021 funding provided in advance by this Act.

Hard-to-Reach Veterans.—The Committee directs VA to submit a report providing an analysis of the hardest-to-reach rural Veterans, the barriers to accessing these Veterans, and next steps to address the needs of these Veterans, no later than 120 days after enactment of this Act.

Rural Transportation Barriers.—The Committee recognizes that many Veterans in rural areas face significant transportation barriers, such as limited transit options or long distances without the capability to drive, to attending in person appointments. While the Committee recognizes the important work of VSOs and the existence of the Veterans Transportation Program, a rural transportation gap still exists. Of the funds provided for ORH, $5,000,000 shall be for a pilot program in which VA provides grants to State

Veterans Affairs Agencies and VSOs to provide transportation to VA appointments for Veterans who live in rural areas. Further, the Committee directs the Secretary to submit a report concurrent with the President's Budget Request for fiscal year 2021 that assesses the viability of this pilot grant program, an analysis of rural transportation needs, and whether there is sufficient need to increase its funding level to reach additional rural Veterans.

Rural Health Resource Centers.—Given the important role ORH's Rural Health Resource Centers play in expanding access to care, the Committee encourages VA to continue considering expanding these centers. ORH has played a major role in VA's overall strategy to combat opioid abuse by funding pilot programs through the Rural Health Initiative focused on pain coaching and modalities that increase Veterans' access to alternatives to opioid-centered pain management. The Committee recommends that as ORH considers expansion, combatting the opioid epidemic and non-opioid pain management in rural areas remain key components of its focus.

Lack of Rural Health Providers.—The Committee notes persistent issues for VA health facilities in rural areas in recruiting and retaining health providers in the face of national provider shortages and a highly competitive environment. The Committee encourages VA to continue to consider expanded use of physician assistants, through both physical facilities and expanded access to telehealth services, to address the rural health provider gap. The Committee directs VA to submit a report, no later than 90 days after enactment of this Act, providing an update on VA hiring needs in rural areas and VA plans to address the provider gap in rural areas to the Committees on Appropriations of both Houses of Congress.

Telehealth in Rural Areas.—The Committee is encouraged by recent efforts by VA with regard to investment in telehealth programs. The Committee acknowledges the recent report submitted by VA outlining their collaborative efforts with several other Federal agencies on this issue. However, the report fails to provide an adequate explanation of the specific plan/strategy that VA will pursue to provide telehealth access to the 33 percent of Veterans who reside in rural areas nationwide. Additionally, the Committee remains concerned that not enough is being done to expand access to those Veterans in rural areas with limited broadband internet access. The Committee directs the Secretary and ORH, to elaborate with specificity on measures to expand capabilities of telehealth to these regions, and continue collaborating with the Department of Health and Human Services, which has dedicated programs specifically for rural hospital access, and the Department of Agriculture, which has dedicated programs specifically for rural broadband access, as well as continued participation with the President's Rural Prosperity Task Force. The Committee also encourages VA to consider partnerships with state and local governments to ensure VA and medical facility inclusion in ongoing broadband expansion projects. The Committee directs the Department to submit a report to the Committee on the cross collaboration of departments and programs in regards to a specific plan and/or strategy to expand telehealth in rural areas, no later than 60 days after enactment of this Act.

Telehealth For Mental Health.—The Committee recognizes the strides made by the Department to reach rural communities with telehealth solutions. The Committee encourages further development and implementation of telemedicine to treat Veterans with mental health issues in rural communities. Telemedicine should be used to its maximum capabilities by VA.

GENDER-SPECIFIC CARE FOR WOMEN

The number of women Veterans using VHA services has increased 22 percent in four years from 423,642 women Veterans in 2014 to 517,241 in 2018. The increased number of women using VHA services necessitates the greater need to provide and expand VA's gender-specific services to women Veterans. The bill provides $581,514,000 for gender-specific care for women, which is $35,000,000 above the request. VA is directed to continue redesigning its women's healthcare delivery system and facilities to ensure women receive equitable, timely, and high-quality healthcare.

Of the amount provided, no less than $35,000,000 shall be used to implement women's healthcare programs, and VA is directed to provide an expenditure plan detailing how the additional funding will be spent no later than 90 days after enactment of this Act. The Committee further requires quarterly briefings on the expenditure of these funds. The Committee directs VA to provide greater resources at VA Central Office and in the field for Mental Health to support the new Women's Mental Health initiatives and directs funding to be provided for three new staff for the Women's Mental Health section in the Office of Mental Health and Suicide Prevention. The Committee directs funding for the education of primary care providers and women-specific programs, including weight loss and pain management, and for the education of peer navigators. The Department is further directed to prioritize hiring women primary care providers and psychologists for women's clinics out of the Medical Services appropriation.

Additionally, the Committee directs that Women's Health Program Managers be full-time jobs and not be tasked with supplemental responsibilities outside of their specified job descriptions.

Gender-Specific Women Veterans' Healthcare.—The Committee remains concerned that VA is not adequately addressing the health needs of women veterans, including obstetrics, gynecological care, and treatment for gender-specific conditions and diseases. The Committee urges VA to continue its efforts to expand access to care in these areas and ensure women veteran health needs, which often differ from men, are met.

Access to Gender-Specific Care for Women.—The Committee expects VA to improve care for women Veterans by monitoring women Veterans' access to gender-specific care services under current and future community care contracts. The monitoring should include an examination of appointment scheduling and completion times, driving times to appointments, and reasons appointments could not be scheduled with community providers. VA must provide women Veterans equitable access to the same healthcare services and programs as male Veterans, including VA's specialized services for substance use disorders, homelessness and treatment for PTSD related to combat military sexual trauma. Most importantly, these programs must be tailored to meet the unique needs of women Vet-

erans, and the Committee expects VHA will expand the list of inspection requirements for facility staff to ensure compliance with the womens health handbook. It is also important to ensure proper coordination of care for women patients with complex care needs who must frequently access gender-specific healthcare services in the community. This is especially important for women Veterans with war-related injuries and/or service conditions who are at higher risk for poor outcomes.

Women Medical Staff.—The Committee continues to support the hiring of more women healthcare professionals in order to provide women Veterans greater opportunities to choose the gender of their healthcare provider.

Breast Cancer Screening Guidelines.—The Committee commends VA's decision to offer breast cancer screening and mammography to eligible women Veterans beginning at age 40. However, the Department should be prepared to offer screening to eligible younger women Veterans should a physician determine or risk factors warrant screening before age 40. The Committee supports this effort to ensure that the care women Veterans receive is consistent with the private sector and will continue to monitor the Department's implementation of this policy. The Department should closely follow ongoing debate within the scientific community on breast cancer screening and mammography coverage to provide Veterans the best care possible. The recommendation includes bill language to ensure VA maintains this policy through fiscal year 2024.

Childbirth Data.—The Committee directs VA to provide a report no later than 180 days after enactment of this Act identifying the number of women Veterans participating in the VA healthcare system who have given birth in the five most recent years for which data are available, how many of the pregnancies were high risk, the number of complications related to the mother or baby, and the number of maternal mortalities that occurred.

Maternity Care Benefits, Survey, and Education Campaign.—The Committee requests a report on the following data related to VA maternity care benefits: the number of eligible women Veterans and actual utilization from each of the last 10 years in each VISN, to the extent that data are available; the number of Veterans who receive prenatal care and have births at a VA facility, and the number of Veterans who receive prenatal care-related services through contracted non-VA providers; information on the transition from VA to non-VA providers and how medical records are returned to VA once a woman is postpartum, particularly if she has an underlying medical condition; the number of maternity care coordinators in each VISN and specific data on minimum employment requirements and caseload. The Committee also directs VHA to develop a patient survey to collect feedback from women Veterans who utilize the maternity care benefit, including their satisfaction with VA maternity care benefits; whether the benefit met their needs; the patient's interaction with the maternity care coordinator; and whether there were barriers to care, providers, or specific services related to the maternity care benefit. Further, the Committee encourages VHA to develop an education campaign publicizing the maternity care benefit, including clarifying who is eligible, what the benefit covers and does not cover, and any cost sharing that may be required with the benefit. The education campaign

materials should be easy for patients to understand and be easily accessible online and at each center for women's health, medical center and CBOC.

Women's Health Transition Training.—Women are the fastest growing subgroup of Veterans, yet fewer women Veterans seek services and support from the Department than men. The Committee expresses its support for the expansion of the Veterans Affairs Women's Health Transition Training Pilot Program and programs similar to it to better support the increasing numbers of women who leave the military and enter the Veterans Affairs support system.

Personal Hygiene Products.—The Committee is concerned that not all VA facilities have committed to VHA Directive 1330.01(2) with regards to personal hygiene products, specifically menstrual hygiene products, being available in public female, unisex, and family restrooms at no charge. The Committee directs VHA to submit a report no later than 180 days after enactment of this Act on the distribution and accessibility of these products across all VA facilities.

Maternal Mental Health Services.—An estimated one out of seven new mothers experience postpartum depression. The Committee requests a report on the maternal mental health services available to women Veterans at each VISN through VHA and the MISSION Act. The report should include mental health support services for women Veterans who: have miscarried; had a stillborn baby; who have had challenges related to fertility; have or have had a high-risk pregnancy; or have postpartum depression. The report should also specifically address if women Veterans are screened for postpartum depression, as well as how many women mental health professionals are available in each VA medical facility.

PHARMACY ISSUES

Drug Pricing Report.—Rising drug prices are a significant cost driver in healthcare. However, VA receives substantial discounts when purchasing prescription drugs. Common sense approaches such as using lower-cost generic drugs, providing care from expert pharmacists and making drug companies compete for business can help drive down the cost of healthcare. The Committee is interested in VA's spending on prescription drugs. The Committee directs the Secretary of Veterans Affairs to submit a report to the Committee on Appropriations of both Houses of Congress no later than 120 days after enactment of this Act. The report should include prescription drug prices (net of rebates) paid by VA for the ten most frequently prescribed drugs and the ten highest-cost drugs for VA. In addition, the report should include total annual costs to VA for all prescription drugs. If data is unavailable, the report should provide a detailed explanation of why.

PRESCRIPTION DRUG ABUSE

Opioid Abuse.—As the reports of increasing numbers of opioid overdoses roil the Nation, the Committee is pleased that VA has taken an aggressive posture in reducing the volume of opioid prescriptions it dispenses and is turning to alternative approaches to pain relief, including the use of complementary medicine tools. The VA Opioid Safety Initiative, begun in 2013, has resulted in a 25

percent reduction in the number of Veterans prescribed opioids for pain relief and the rate of overdose among Veterans prescribed a prescription opioid has been cut in half. The Committee encourages VA to continue the challenging effort to reduce opioid use among Veterans, half of whom suffer from chronic pain. The bill provides $396,924,000 for opioid treatment and prevention efforts, of which $54,054,000 is provided for activities authorized by the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114–198).

Opioid Safety Initiative.—The Committee recognizes that VHA has made progress in addressing opioid safety for Veterans through its Opioid Safety Initiative (OSI). The Committee requests VHA to provide an impact study of OSI's effectiveness and challenges no later than 90 days after enactment of this Act.

Opioid Therapy Risk Report.—The Committee urges VA to ensure that all VA providers who prescribe opioids use VA's Opioid Therapy Risk Report tool consistently, including prior to initiating opioid therapy, to ensure safe prescribing and to help prevent diversion, abuse, and double-prescribing. The Committee also urges VA to further improve the timeliness of data available in the tool to allow a provider to have real-time access to data. It is critical that VA clinicians have access to a patient's opioid therapy history from outside providers to ensure safe pain management care, as many Veterans also seek care from providers in the community who may prescribe them medication.

Naloxone.—Public health agencies have appropriately highlighted the risk of overdose from doses of opioids greater than 90 morphine milligram equivalents (MME) per day. The Committee is concerned about the hundreds of millions of prescriptions each year of immediate release (IR) lower MME opioids, such as hydrocodone and oxycodone. These opioids are commonly associated with abuse, are a common pathway to addiction, and present a risk of overdose. Some States have limited the prescribing of these IR opioids. An alternative approach might be to assess the benefit of co-prescribing naloxone with IR and extended release opioids. Prescribers, including dentists and other primary care providers, have an opportunity to become more attuned to the risks of all opioids through the consideration of co-prescribing naloxone with each opioid prescription. The Committee awaits the report for the Veterans Health Administration to develop a strategy to test this hypothesis, execute a pilot program and assess the benefit for enacting such a policy for Veteran patients, as directed in House Report 115–673.

Opioid Treatment Alternatives.—The Committee notes that the United States is grappling with an opioid epidemic. Some areas, such as Appalachia, are disproportionately hard-hit by this crisis. The Committee, therefore, encourages VA to ensure pain treatment alternatives to opioids, such as chiropractic care, are available to Veterans where they are most needed. Further, the Committee encourages VA to integrate such treatments into VA's medical centers or clinics to be provided by VA staff, or on a contract basis where needed.

Pain University.—The Committee recognizes the excellent and inspiring work from the Tomah VA facility in Tomah, Wisconsin, which has successfully implemented a program called Pain University. The program seeks to incorporate alternative medicine, such

as acupuncture and meditation, to reduce Veterans' reliance on prescription pain medications, which have a higher likelihood of addiction leading to substance abuse. The Pain University program was recognized as a gold status program by VHA in 2016 for its work. The Committee encourages VHA to continue to expand implementation of the Pain University program to other VA clinics so more Veterans have access to non-addictive pain management therapies.

Substance Use Disorder (SUD) Study.—As the Committee supports VA's ongoing work to reduce substance use disorder among Veterans, the Committee is concerned VA has yet to report on the number and proportion of Veterans with substance use disorder, broken down by age, including a breakdown by state, and additionally include available demographic data, as requested in House Report 115–673. The report deadline was 120 days after passage and VA should consider this report a priority. The Committee directs VA to provide a status update on this study 15 days after this report is filed.

Opioid Safety and SUD.—The Committee urges VA to implement a comprehensive medication selection, adherence, compliance and internet-based education pilot program related to opioid safety and substance use disorder in order to provide assistance for at-risk Veterans. Using off-the-shelf technology, such as smart pill bottles, internet-based technologies, and bi-lateral text messaging, VA can reduce suicide, relapse, and hospital visits.

Military Sexual Assault Screening.—In 2016, it was estimated that 14,900 servicemembers, both men and women, were sexually assaulted, usually more than once. One in four women and one in three men were assaulted by someone in their chain of command. Due to this high prevalence, it is important to ensure that all those who are victims are identified and receive proper treatment. The Committee is concerned about the high prevalence of sexual assault among servicemembers, both men and women, during their service. The Committee is concerned that the effects from this assault persist once servicemembers return home and can manifest in mental health disorders such as depression, PTSD, substance use disorders, eating disorders, and anxiety. Because military sexual trauma is prevalent, the Committee recommends that all Veterans seeking treatment services are screened for sexual assault using evidence-based screening tools in order to successfully treat those who have experienced assault.

Behavioral Health and Substance Use Screening.—The Committee is aware of the high prevalence of mental illness and substance abuse among Veterans, particularly PTSD, depression, anxiety, and alcohol and opioid abuse. The Committee strongly recommends that all Veterans seeking treatment services in a VA facility be screened for the listed illnesses, at a minimum annually, using evidence-based assessment tools.

Substance Abuse Among Women.—In recent years, rates of problematic substance use among women Veterans have been increasing. While men have greater rates of addiction than women, many women Veterans have characteristics that make them more prone to substance use disorders than men, including past trauma (physical and sexual). As such, the Committee recommends that the Department ensures women Veterans have timely access to a full

spectrum of integrated substance abuse treatment services, from detoxification to rehabilitation. Additionally, the Department should increase the availability of gender-specific substance use disorder programming and ensure all programming venues comply with the environment of care standards for women's privacy and safety.

WHOLE HEALTH INITIATIVE

Traditionally, Veteran medical providers have focused on the physical symptoms of Veterans, zeroing in on their diseases and ailments. However, VA is working to shift this focus by moving to a whole health model, which is a holistic look at the many areas of life that can affect a Veteran's health, including their work environment, relationships, diet, sleep patterns, and more. Whole Health is an approach to healthcare that empowers and enables the Veteran to take charge of their health and well-being and live their life to the fullest. The Committee is extremely pleased with the Whole Health model of care. The recommendation provides $20,000,000 above the request to expand the use of the Whole Health model.

Interactive Patient Care.—The Committee is impressed by the remarkable work that the Office of Patient Centered Care and Cultural Transformation is doing to approach Veterans' health with a holistic effort. Early data indicates that Veterans who are using Whole Health are using less opioids and derive greater satisfaction and meaning in their lives. Yet, only 18 Flagship Whole Health facilities exist that are implementing the Whole Health System. The Committee is concerned that only one-third of VA Medical Centers have implemented the Whole Health initiative through interactive patient care, a model that empowers patients and educates them on the care they receive. Interactive patient care implementation has shown increases in patient satisfaction and improvement in quality and safety outcomes. Therefore, the Committee directs VA to expand use of interactive patient care through use of a national contract to ensure coordination and standardization of field implementation of the Whole Health initiative. Furthermore, the Committee directs the Department to submit a report to Congress on the outcomes derived from the Whole Health System and the resources needed to expand the Whole Health System across all VISNs. The report shall be submitted no later than 180 days after enactment of this Act.

Interactive Patient Care Outside VA Medical Centers (VAMCs).—The Committee understands that several VAMCs are implementing the Whole Health model through interactive patient care, but the Committee is concerned how the Department will ensure the Whole Health model is sustained when the Veteran is outside of the VA inpatient setting. To achieve success, VA must facilitate the Veteran's care team's ability to provide the same consistent and collaborative patient engagement and interactive patient care outside of VAMCs and enable the Veteran and the Veteran's care team to be actively involved in the Veteran's Whole Health Plan. The Committee directs the Department to leverage technology to facilitate management and adaptations of the Veterans Whole Health Plan, ongoing communication, and awareness of additional VA services to support fulfillment of the Whole Health Plan.

Creative Arts Therapies.—The Committee acknowledges the effective use of creative arts therapies in treating Veterans with traumatic brain injuries and psychological health conditions. The Committee supports the integration of the arts and creative arts therapies provided by VA's Office of Patient Care and Cultural Transformation through the Whole Health initiative and encourages VA's continued partnerships with healing arts providers. The Committee strongly supports the Secretary in continuing to expand these innovative programs throughout the Veterans Healthcare Networks and provides an additional $5,000,000 to do so.

OTHER HEALTH ISSUES

Central Alabama Veterans Health Care System (CAVHCS).—The Committee calls the Department's attention to the urgent need to improve the care provided at and the management of CAVHCS. The Department is directed to immediately and fully correct deficiencies and problems at CAVHCS and ensure VA Southeast Network (VISN 7) is focused on providing appropriate and additional assistance to the system. The Committee directs the Department to develop a plan to resolve these problems and to submit the plan by August 1, 2019, to the Committees on Appropriations of both Houses of Congress. In addition, the Department is directed to submit quarterly reports describing implementation of the plan and improvements made for Veterans in central Alabama. The Committee further directs the Department to develop a plan to address urgent needs at other VA healthcare systems with poor or failing grades and to submit the report to the Committees on Appropriations of both Houses of Congress within 90 days after enactment of this Act.

Hepatitis C Virus (HCV) Outreach and Testing.—The Committee is pleased with VA's significant progress in reaching and treating Veterans who have lived with HCV for years, and it continues to dedicate resources towards the goal of screening and treating Veterans who are disproportionately affected by the disease. The Committee notes that the prevalence of Hepatitis C is higher among servicemembers, but that prevalence data for the cohort at greatest risk, Vietnam Era Veterans, remains unknown. VA is encouraged to work with other stakeholders and VSOs to conduct an outreach testing campaign that establishes the prevalence number for this cohort while evaluating point-of-care testing opportunities that can reach Veterans outside of the VA system. Furthermore, the Secretary is urged to implement a pilot program to evaluate the benefits of providing access to rapid point-of-care outreach testing for Hepatitis C for Vietnam and Vietnam-era Veterans utilizing enhanced eligibility criteria that would make such services available to all honorably discharged servicemembers who served between February 28, 1961, and May 7, 1975.

Lung Cancer Screening.—The Committee continues to note with concern that Veterans at high risk of developing lung cancer do not have access to lung cancer screening programs that are available to Medicare beneficiaries. The Committee encourages the Department to expand access to lung cancer screening for high-risk Veterans by developing a VA Centers of Excellence for Lung Cancer program.

Cancer Moonshot Contribution.—The Committee supports the Beau Biden Cancer Moonshot Initiative and the Department's contribution utilizing advances in genomic science to provide targeted treatment to Veterans. The Department has identified prostate cancer, triple-negative breast cancer, and colorectal cancer as areas of priority. Due to the prevalence of various skin cancers among servicemembers, the Committee directs that skin cancer be included as a priority as well.

Colorectal Cancer Screening.—The Committee reminds VA of the direction in the Statement of Managers accompanying the Consolidated Appropriations Act, 2018 (P.L. 115–141) that directed the Department to offer all seven colorectal cancer screening strategies recommended by the United States Preventive Services Task Force or to notify the Committee if it is not using all seven approaches.

Prostate Cancer.—Prostate cancer is the most frequently detected cancer among Veterans, with an estimated 10,000 new cases diagnosed annually. Unfortunately, early detection is not yet an exact science. Although prostate biopsies are the standard of care, they often miss detecting cancer. This fear of missed cancer often leads to multiple, invasive biopsies, many of which may be unnecessary. Recent biotechnology advancements within the emerging field of prostate cancer biomarkers have hastened the detection of prostate cancer and curbed the financial costs associated with unnecessary repeat diagnostic procedures. The Committee encourages VA to accelerate the adoption of such technologies within VHA, particularly for biomarker tests on the Federal supply schedule, to help rule out false-negative biopsy concerns and alleviate financial and mental anguish for Veterans.

Rare Cancers.—The Committee is pleased by the December 2017 signing of the collaboration agreement between the Department, the John P. Murtha Cancer Center at Walter Reed National Military Medical Center, and the National Cancer Institute focused on improving cancer care for common cancers affecting servicemembers and Veterans. However, the Committee remains concerned about the need for a better understanding of, and treatment options for, rare cancers. There are 55 cancers that disproportionately affect those serving in the military and 67 percent of them are rare. Of the 396 total cancers, 374 are rare and few treatment options are available. Servicemembers are uniquely exposed to carcinogens, including asbestos, industrial solvents, nuclear radiation, depleted uranium, lead, fuels, polychlorinated biphenyls, and components of Chemical Agent Resistance Coating, all hazards that may increase the risk of cancer for servicemembers and Veterans. Therefore, the Committee directs the Department to issue a report no later than 90 days after enactment of this Act on how the collaboration between the Department, the John P. Murtha Cancer Center at Walter Reed National Military Medical Center, and the National Cancer Institute will address rare cancer, including molecular subtyping, systemic research and development gaps, and inadequacies in targeted treatment options.

Nuclear Medicine Quality Improvements.—The Committee is aware of evidence demonstrating the prevalence of extravasations in nuclear medical procedures. Extravasations of diagnostic radiopharmaceuticals negatively affect the sensitivity and quantification of nuclear medicine scans. Extravasations can affect disease stag-

ing and treatment assessment, result in unnecessary invasive procedures and additional radiation exposure, and lead to higher costs for patients and payers. As America's largest integrated healthcare system, the VAMC should lead by example in acting to reduce medical errors and medical waste. The Committee encourages VAMCs to monitor injection quality and develop a physician/patient reporting system to disclose when extravasations occur. No later than 90 days after the enactment of this Act, VHA shall provide to the Committees on Appropriations of both Houses of Congress a report on efforts to monitor injection quality and reduce the incidence of extravasations.

Pressure Ulcer Prevention.—The Committee remains concerned about the incidence of facility-acquired pressure ulcers and the associated $1,300,000,000 to $3,600,000,000 in annual costs for the treatment of hospitalized patients with pressure ulcers in VA facilities. The Committee understands that significant health benefits and cost savings may be possible through non-invasive innovative biometric sensor technologies that have produced promising results in the early detection of pressure ulcers. The Committee looks forward to receiving the report from VA, as requested in House Report 115–673, presenting the steps VHA is taking in this area, including the status of technologies VA has assessed. However, the Committee believes more can be done to reduce the rate of facility-acquired pressure ulcers that affect thousands of Veterans each year. The Committee directs the Secretary to continue prioritizing wound care by executing a pilot program to reduce the incidence of pressure ulcers in VA facilities. The Committee provides $2,000,000 for the purpose of carrying out a pressure ulcer prevention pilot program. The Committee encourages VA to consider pilot sites with a clinical and research focus on wound care, and locations with higher incidence rates of pressure ulcers, such as sites that serve patient populations with limited mobility and spinal-cord injury.

Pressure Ulcer Transparency.—The Committee acknowledges the need to better analyze and prevent hospital-acquired pressure ulcers/injuries, as well as associated complications, in the VA healthcare system. To date, inadequate information is available to measure the incidence rates and impact of pressure ulcers/injuries at VHA facilities. Department of Health and Human Services data demonstrates growing rates of fatal hospital-acquired pressure ulcers/injuries nationwide, and research published by the National Institutes of Health shows more than one-third of Veterans with spinal cord injuries report costly pressure ulcer/injuries annually. The Committee directs VHA to conduct an assessment of the Department's efforts to (1) monitor the incidence and impact of unintended Hospital-Acquired Conditions; (2) reduce the incidence of pressure ulcers/injuries and Surgical Site Infections; and (3) expand public reporting on U.S. Centers for Medicare and Medicaid Services hospital comparisons to include total pressure ulcer/injury incidence at VA medical centers. The Committee further instructs VHA to incorporate never-event reduction protocols into existing best practices for its Veterans healthcare providers. VHA has adopted healthcare transparency as a strategy to enhance public trust and to help Veterans make informed choices about their

healthcare and therefore, the Committee encourages the Department to continue its efforts in transparency.

Wheelchairs.—The Committee encourages the Department to work with Veterans who are eligible to receive a wheelchair to determine the best options for restoring their maximum achievable mobility and function for daily life.

Food as Medicine.—The Committee recognizes the value of proper nutrition and food's effect on health. Patients with three or more chronic conditions represent 35 percent of Veterans receiving VA care and account for 65 percent of VHA costs. Additionally, 78 percent of Veterans receiving VA care are overweight and 41 percent are obese. The Committee continues to urge VHA to be proactive in promoting wellness and disease prevention by providing evidence-based nutritional services. The Committee directs VA to provide a status update on current practices as well as a plan to expand nutritional education and means to increase access to nutritional foods for Veterans 15 days after this report is filed.

Long-Term Care.—The Committee is aware of the aging Veteran population and supports long-term care that focuses on facilitating Veteran independence, enhancing quality of life, and supporting the family members of Veterans. The Committee supports home- and community-based care, residential settings, nursing homes, geriatric services, and advanced care planning for Veterans and their families. Multiple chronic conditions, life-limiting illness, or disability associated with disease, aging, or injury can be factors of consideration. The Committee acknowledges that the Veteran population faces unique health risks and that each Veteran requires an individualized approach to care.

Hospice Care for Veterans.—The Energy and Water, Legislative Branch, and Military Construction and Veterans Affairs Appropriations Act, 2019 (P.L. 115–244) urged VA to undertake a pilot program to develop techniques, best practices, and support mechanisms to improve end-of-life care for combat Veterans and Vietnam-era Veterans. Due to the lack of meaningful advancement toward addressing the unique needs of Vietnam Veterans, VA is directed to carry out this pilot program and to engage nonprofit hospice and palliative care providers with Vietnam Veteran-centric programs in implementing the pilot program. The Committee is aware that organizations such as the nonprofit National Partnership for Hospice Innovation are developing programs designed to meet the specific end-of-life care needs for Vietnam-era Veterans and strongly reiterates that such an approach could be beneficial to Iraq, Afghanistan, and Syria combat Veterans in the future. The Committee directs VA to provide to the Committees on Appropriations for both Houses of Congress an update, no later than 30 days after enactment of this Act, on the status of this pilot program.

VA Affiliation With Minority Medical Schools.—The Committee is pleased with the Department's improvements to its academic affiliation activities with minority medical schools. For the purposes of enhancing training initiatives, improving patient care, and providing educational opportunities for our Nation's Veterans, the Committee urges VHA and the Office of Academic Affiliations to maintain this ongoing commitment to minority health professions schools and report back to Congress no later than 90 days after enactment of this Act on the progress.

Minority Veteran Care.—The Committee acknowledges the Department's efforts to streamline data collection practices through a working group and other initiatives. The Committee notes that the Veteran population is becoming increasingly diverse. According to VA's Center for Minority Veterans, more than one-third of Veterans will come from minority groups by the year 2040. The Committee also acknowledges that the Department currently has a working group, which has the goal of developing streamlined data collection processes. Accordingly, the Committee directs the Secretary to provide a report no later than 180 days after enactment of this Act that details how VA can restructure its data collection practices to more accurately and consistently capture data on the race and ethnicity of Veterans across its various systems. This report shall take into consideration that the Department is in the midst of an acquisition of a new electronic health record system that will combine the Department's current data collecting programs and make recommendations of how implementation of this new program can help improve data collection on Veterans.

Freely Associated States (FAS) Veterans' Access.—The Committee is concerned about impediments to VA healthcare access for FAS Veterans. Veterans in the FAS must travel hundreds to thousands of miles to the nearest VA medical center in Guam or Hawaii, in some circumstances at their own expense, to get healthcare. For those who are able to travel to seek care, the collective costs are magnified by lost wages resulting from missed days at work and childcare costs, as well as time away from families. Given the significant time, resources, and high costs for travel for some Veterans, including airfare, transportation, and lodging, many FAS Veterans are never able to access the VA health services they have earned through their military service. As VA works to transform its Community Care programs, the Committee directs VA, no later than 90 days after enactment of this Act, to provide a report that assesses options for improving access to VA healthcare for FAS Veterans. The report should include the number of Veterans residing in the FAS who have utilized services in VA Pacific Islands Health Care System facilities over the last three fiscal years, the extent of travel benefits offered to Veterans and eligibility requirements for the benefits, an average estimated personal cost for an FAS Veteran to access VA care, the estimated costs for providing telehealth services in FAS through a pilot program, and recommendations for how VA can reduce burdensome restrictions under the Foreign Medical Program using existing authorities. Furthermore, the Committee encourages VA to work with Federal and non-Federal partners, including the Departments of Defense, Interior, and Health and Human Services, as well as non-VA healthcare facilities and educational institutions, to leverage shared resources and improve access for delivery of care through collaboration.

VA Healthcare Expansion.—The Committee directs VA to increase access to direct VA care for Veterans living in remote and underserved areas, such as the Commonwealth of the Northern Mariana Islands, by increasing the number of full-time, dedicated, VA medical and mental health providers in these areas.

FAS Data Collection.—The Committee remains concerned about the challenges to accessing quality healthcare for Veterans residing

in outlying areas, such as the Northern Mariana Islands and the Freely Associated States. The Committee is aware of potential obstacles in data collection to account for the number of Veterans residing in these areas. The Committee seeks to understand the data limitations that may exist, and how VA can improve data collection from the outlying areas to help inform the development of proposals to ensure that health needs of Veterans, including Pacific Island Veterans, are met. The Committee looks forward to receiving the strategic plan as requested in Conference Report 115–929 to improve the utilization of healthcare services of Veterans in outlying areas. In addition, the Secretary is directed to provide the Committees on Appropriations of both Houses of Congress with information regarding VA's process for informing Veterans in the outlying areas about enrollment in the Foreign Medical Program and if the Department discloses information about potential barriers Veterans may face in utilizing services and other VA benefits in outlying and remote areas.

Dialysis Services.—The Committee understands that VA has a long history of providing dialysis services through community dialysis providers under the Nationwide Dialysis Services contracts when VA is unable to directly provide such care. Today, approximately 15,000 Veterans receive timely access to high-quality dialysis services through these national dialysis contracts. The Committee will monitor the Department's transition to the Community Care Network (CCN) contracts when an adequate network of dialysis providers is available in the CCN. The Committee expects VA will ensure that care is not disrupted or diminished for the Veterans who receive treatment through experienced providers under the Nationwide Dialysis Services contracts.

Healthcare-Associated Infection (HAI) Reduction.—The Committee is concerned with improving the quality of healthcare for Veterans and their family members, including by reducing the incidence of HAIs and methicillin-resistant Staphylococcus aureus (MRSA) infections. According to the Centers for Disease Control and Prevention, roughly one in thirty-one hospital patients has at least one HAI at any given time. HAIs are associated with roughly 99,000 deaths per year and contribute billions of dollars annually to the total cost of healthcare. Within medical treatment facilities, medical gowns, bed linens, and other textiles and hard surfaces such as bed-rails, work stations, and trays are major vectors for these types of infections. Therefore, the Committee directs the Department to submit a report no later than 180 days after enactment of this Act to the Committees on Appropriations of both Houses of Congress on the rate of incidence of HAIs within all medical care facilities under its jurisdiction; recommend means of reducing the incidence of HAIs at such facilities; and consider infection reduction functionality in procurement decisions regarding textiles and hard-surface items. The Committee further encourages the Department to use evidence-based tools to significantly reduce the incidence of HAIs.

Creutzfeldt-Jakob Disease Monitoring.—Veterans and their dependents who resided at United States Military bases in Germany, Belgium, and the Netherlands for six months or more from 1980 through 1990, and Veterans and their dependents who resided at United States Military bases in Greece, Turkey, Spain, Portugal,

and Italy for six months or more from 1980 through 1996 are barred from donating blood due to their potential exposure during their military service to beef that was infected with bovine spongiform encephalopathy, resulting in possible infection of Creutzfeldt-Jakob Disease (CJD), a human prion disease. The Committee is committed to understanding the residual impacts of CJD within the Veteran community. The Committee urges the Department to reference data from existing medical records of Veterans to determine the percentage of Veterans from the above referenced subgroup that have more frequent or unexplained symptoms associated with CJD compared to the civilian population. This body of data could be helpful in clarifying the extent and specifics of the medical issues suffered by Veterans from exposure to CJD.

Artificial Intelligence And Machine Learning.—The Committee directs the Secretary to submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act on how the Department is utilizing artificial intelligence and machine learning to improve healthcare services to Veterans.

Prosthetics.—The Committee is concerned about the proposed regulation regarding prosthetic and orthotic providers and strongly encourages the Department to allow Veterans to choose the best provider for their needs.

Tobacco Use Among Veterans.—A 2018 government study found almost 30 percent of Veterans are smokers. Interventions for Veterans are critical to reduce tobacco use and lead to improved health outcomes. Women Veterans are uniquely impacted by the effects of tobacco use, including difficulty getting pregnant, early menopause, osteoporosis, cervical cancer, and breast cancer. The Committee encourages VA to continue promoting cessation and evidence-based tobacco interventions for our Veterans.

Burn Pits.—The Committee continues to support VA's work through the Airborne Hazards and Burn Pits Center of Excellence on diagnoses, mitigation, and treatment of conditions related to airborne hazards and burn pits. The Committee continues to encourage VA to partner with the Department of Defense, institutes of higher learning, and other public and private entities to carry out this initiative and provides an additional $5,000,000 for the Center.

Jason Simcakoski Memorial and PROMISE Act Implementation.—The Committee supports robust funding to support the continued implementation of the Jason Simcakoski Memorial and Promise Act, which passed as Title IX of the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114–198), including updating therapy and pain management guidelines, strengthening provider education and training, and improving patient advocacy.

VSO Wellness Pilot Program.—The Committee is concerned that VA is taking too much time to implement the VSO Wellness pilot program, authorized in Section 252 of the Consolidated Appropriations Act, 2018 (P.L. 155–141). This is a priority of the Committee, and the Department is directed to implement the pilot program expeditiously. The Committee directs VA to provide a status update on the pilot program no later than 14 days after the report is filed.

Health Videos for Veterans.—Hospitals and physicians' offices around the country are currently utilizing health videos in their lobbies, waiting rooms, and exam rooms to supplement and rein-

force the medical care, advice, and instruction physicians are providing. The Committee notes that educational resources, such as these could result in cost savings and quality of life improvement for Veterans. The Committee encourages VHA, where possible, to have health videos available to Veterans and directs the Secretary to develop a plan to implement educational video systems within VHA.

MEDICAL COMMUNITY CARE

Fiscal year 2019 enacted level	$9,384,704,000
Fiscal year 2020 enacted level	10,758,399,000
Fiscal year 2020 budget year request	4,521,400,000
Committee 2020 budget year recommendation	4,521,400,000
Fiscal year 2021 advance appropriation request	17,131,179,000
Committee 2021 advance appropriation recommendation	17,131,179,000
Comparison with:	
Fiscal year 2020 enacted level	6,372,780,000
Fiscal year 2021 advance budget request	– – –

The Medical Community Care account was created in the Surface Transportation and Veterans Health Care Choice Improvement Act of 2015 (P.L. 114–41). Per the MISSION Act of 2018, all community care programs are consolidated into one community care program. For fiscal year 2021, the bill provides $17,131,179,000, of which $2,000,000,000 is available until September 30, 2022.

The Committee provides $4,521,400,000 for an additional amount for fiscal year 2020 as requested in the budget request.

Third-Party Payments and Reimbursements.—The Committee is concerned about the timeliness of reimbursements by VA to private healthcare/third-party providers. The Committee remains concerned that VA has created an inefficient process that must be reformed. As VA continues the MISSION Act implementation, the Committee believes VA must further prioritize efficient and prompt payment to community providers to ensure timely access to quality care. Delays in processing of such payments undermines the ability to recruit and retain private healthcare providers to service our Nation's Veterans, especially among rural communities. Therefore, no later than 90 days after enactment of this Act and then on a quarterly basis, the Secretary shall provide the Committees on Appropriations of both Houses of Congress a comprehensive report detailing the amount owed to outside providers for every State. The report shall include outstanding payments over six months old and the corrective actions being implemented to address these outstanding balances as well as average time for repayment. Furthermore, this report will include a comprehensive plan to prevent this issue from reoccurring in the future.

Choice Program Third-Party Payments and Reimbursements.—The Committee recognizes the massive undertaking it took to develop and implement the Veterans Choice Program and the difficulties that patients and providers have experienced in dealing with the third-party administrators of the program. The Committee awaits the fiscal year 2019 report, as requested in House Report 115–673, on the effectiveness of the programs with third-party administrators.

Transportation to Community Care Providers.—The Committee is concerned with the lack of access to transportation for Veterans who have challenges traveling to work, school or medical appoint-

ments due to disability, illness, or financial hardships. Veterans who live in both rural and urban areas experience a lack of consistent and efficient travel, especially access to medical care. As VA continues to implement the Veterans Community Care Program, transportation to medical care and services in the community will be an even bigger obstacle for Veterans moving forward. The Committee urges VA to prioritize transportation assistance for Veterans who live in both rural and urban areas, and encourages VA to work with state, regional and local groups, local VSOs, and nonprofits on transportation assistance programs and provide direct transportation services for Veterans who have limited access to transportation networks.

MEDICAL SUPPORT AND COMPLIANCE

Fiscal year 2019 enacted level	$7,239,156,000
Fiscal year 2020 enacted level	7,239,156,000
Fiscal year 2020 budget year request	98,800,000
Committee 2020 budget year recommendation	98,800,000
Fiscal year 2021 advance appropriation request	7,914,191,000
Committee 2021 advance appropriation recommendation	7,914,191,000
Comparison with:	
Fiscal year 2020 enacted level	675,035,000
Fiscal year 2021 advance budget request	– – –

The Medical Support and Compliance appropriation funds the expenses of management and administration of the Department's healthcare system, including financial management, public health and environmental hazard, quality and performance management, medical inspection, human research oversight, training programs and continuing education, security, volunteer operations, and human resources.

The bill provides $7,914,191,000 in advance fiscal year 2021 funding. The Committee has included bill language to make available through September 30, 2022, $150,000,000 of the Medical Support and Compliance appropriation for fiscal year 2021.

The Committee provides $98,880,000 for an additional amount for fiscal year 2020 as requested in the budget request.

MEDICAL FACILITIES

Fiscal year 2019 enacted level	$6,004,468,000
Fiscal year 2020 enacted level	6,141,880,000
Fiscal year 2020 budget year request	– – –
Committee 2020 budget year recommendation	20,000,000
Fiscal year 2021 advance appropriation request	6,433,265,000
Committee 2021 advance appropriation recommendation	6,433,265,000
Comparison with:	
Fiscal year 2020 enacted level	291,385,000
Fiscal year 2021 advance budget request	– – –

The Medical Facilities appropriation provides funds for the operation and maintenance of the Department's healthcare system's capital infrastructure. Included under this heading are provisions for costs associated with utilities, engineering, capital planning, leases, laundry, groundskeeping, garbage, housekeeping, facility repair, and property disposition and acquisition.

The bill provides $6,433,265,000 in advance fiscal year 2021 funding. The Committee has included bill language to make available through September 30, 2022, $250,000,000 of the advance Medical Facilities appropriation for fiscal year 2021.

The Committee provides $20,000,000 as an additional amount above the non-recurring maintenance (NRM) fiscal year 2020 appropriation of $1,175,581,000 for women's health and mental health NRM projects. Within the additional NRM funding for mental health, the Committee directs VA to prioritize construction to increase the number of beds available for overnight mental health treatment for Veterans.

Spending Plan.—The Committee expects VA to provide, no later than 30 days after enactment of this Act, an expenditure plan detailing the planned use of the funds provided. The Committee understands that some of the projects planned for fiscal year 2020 may not be ready within that timeframe, requiring an adjustment to the spending plan. The Committee requests a quarterly update of the plan if the funding for any single project changes by more than $3,000,000 during that time period.

Facility Expansion.—The Committee continues to support an expansion of the number of clinics available to Veterans. To help accomplish this, the Committee encourages VA to identify CBOC facilities, with a priority in underserved, rural, and remote areas, for facility expansion opportunities in order to accommodate additional patients and provide enhanced services, thereby reducing the need for Veterans to travel long distances for care. VA is encouraged to look at existing CBOCs that are operating at full capacity, have a proven record of delivering services, and have community support to expand the facility. Additionally, the Committee urges VA to continue to explore the potential benefits of placing VA clinics on military installations located in areas with high Veteran populations and where nearby VA infrastructure is overburdened.

Community-Based Outpatient Clinic in California.—The Committee is encouraged by the issuance of a lease for a new community-based outpatient clinic in Bakersfield, California, and directs the Department to expeditiously finalize this project and continue to provide regular updates as directed in House Report 114–497.

Operating Room Patient Safety and Fire Prevention.—The Committee is concerned that operating room fires have been increasing and encourages the Department to look at technology that can mitigate risks of fires. The Committee directs of the funds provided not less than $1,000,000 shall be utilized by the Department to carry out a pilot project that tests and validates operating room fire safety technology at multiple VHA medical facilities and report back to the Committee on the status of the pilot within 90 days of enactment of this Act. Furthermore, the Committee directs the Department to provide an annual report concurrent with the budget submission to the Committees on Appropriations of both Houses of Congress, on the number of operating room fire events, data showing the total number of tort claims, the amount per claim, and the total amount of these claims, paid by the Department of the Treasury's Judgment Fund or any other taxpayer-funded sources as a result of VA operating room fires and safety issues and VHA's effort to reduce the risk of operating room fires utilizing available technology.

Strategic Analytics for Improvement and Learning (SAIL).—The Committee directs the Secretary to quarterly address and provide the Committees on Appropriations of both Houses of Congress material on failing VA facilities as defined by VA's SAIL data. The

quarterly update will include the current state of failing facilities and any steps or improvements that are in place.

Facility Transformations.—The Committee directs the Department to report on specific measures it takes to track and prioritize both the physical and cultural transformation within VA medical facilities to better serve women Veterans. The Committee is concerned that VA has failed to keep up with a growing population of women Veterans who need equitable access to medical care. When one in four women Veterans report having experienced unwanted sexual attention while serving, it is concerning that the very system intended to address their trauma is failing to foster a safe environment for them. VA's own 2015 Study of Barriers for Women Veterans to VA Health Care noted that women Veterans experienced unwanted sexual attention at VA facilities. The President's Budget for Fiscal Year 2020 identifies the need to upgrade facilities to better serve women Veterans, such as separate entrances and parking accommodations that will take several years to implement. VA's construction priority list was established over decades and contains billions of urgently needed repairs. The 2019 VA Strategic Capital Investment Planning Process (SCIP) list of construction projects had approximately $120,000,000 in unfunded facilities improvements for women Veterans. The Committee directs the Department to prioritize funding for medical facilities to accommodate women Veterans.

Use of Smart Technologies.—The Committee is interested in the potential use of new and innovative devices, systems, and networks to improve the operation and management of VA facilities, such as energy, traffic control, perimeter security and access control systems, and encourages the Department to work with industry leaders to develop a demonstration project that could be adapted by a variety of VA facilities.

Medical Facilities Realignment.—The Committee remains concerned that VA medical care realignments are being approached in an ad hoc manner by each individual VISN rather than on a comprehensive basis by VA Central Office. Moreover, such an approach may lead to inequitable and inefficient distribution of medical resources throughout the Nation. Before VA makes any decision to relocate, close, or diminish services at an existing facility, or proceeds with any such realignment already underway, consideration must be given to the impact such action would have on Veterans, especially tribal Veterans or Veterans in rural or highly rural areas. The Committee directs VA to adhere to a clear and transparent process that engages all parties from the onset and is consistent with a national realignment strategy. Since the conference report for the Consolidated Appropriations Act, 2016 (P.L. 114–113), the Committees have suspended the proposed realignment of services in VISN 23 until a report was transmitted to the Committees, and that report has not been received. The Department is again directed to comply with the request for the report and meanwhile suspend the proposed realignment of services in VISN 23 until such time as the Department transmits to the Committee a report that outlines the following: (1) a national realignment strategy that includes a detailed description of realignment plans within each VISN; (2) an explanation of the process by which those plans were developed and coordinated within each VISN; (3) a cost

versus benefit analysis of each realignment, including the cost of replacing VHA services with contract or other outsourced services; (4) an analysis of how any realignment will impact tribal, rural, and highly rural Veteran healthcare within each VISN; and (5) an analysis of how any realignment will impact access to, enrollment in, and the capacity of VA PTSD and Residential Rehabilitation Treatment Program services within each VISN and nationally.

War Related Illness and Injury Study Centers (WRIISC).—The Committee is concerned that research and clinical trials are urgently needed to develop effective treatments for Veterans exposed to toxic environmental hazards, such as burn pits. Cost effective models for rapid development of new treatments for Gulf War Illness using computational models, research funding through DOD's Congressionally Directed Medical Research Program (CDMRP), and clinical experts in environmental medicine have proven effective in partnership with VA medical centers. The Committee notes the Department's extensive discussions of adding additional WRIISC sites, and directs the Secretary to establish a WRIISC focused on toxic environmental exposures to leverage research funding through the CDMRP and clinical partnerships.

Women Veterans Health Facilities.—The Committee is concerned about the harassment women Veterans have had to endure at VA healthcare facilities. The Committee requests VHA to conduct a feasibility study of establishing women-only clinics in each VISN no later than 180 days after enactment of this Act.

MEDICAL AND PROSTHETIC RESEARCH

Fiscal year 2019 enacted level	$779,000,000
Fiscal year 2020 budget request	762,000,000
Committee recommendation in the bill	840,000,000
Comparison with:	
Fiscal year 2019 enacted level	61,000,000
Fiscal year 2020 budget request	78,000,000

This appropriation provides for medical, rehabilitative, and health services research. The bill provides $840,000,000 available through September 30, 2021. The Committee recognizes the importance of the research conducted by VA for Veterans' quality of life and health and provides $78,000,000 above the request and $61,000,000 above fiscal year 2019 for these activities.

Medical research is an important aspect of the Department's programs, providing complete medical and hospital services for Veterans. The prosthetic research program is also essential in the development and testing of prosthetic, orthopedic, and sensory aids for the purpose of improving the care and rehabilitation of eligible disabled Veterans, including amputees, paraplegics, and the blind. The health services research program provides unique opportunities to improve the effectiveness and efficiency of the healthcare delivery system. Budgetary resources from a number of areas, including appropriations from the medical care accounts, reimbursements from DOD, grants from the National Institutes of Health, private proprietary sources, and voluntary organizations, provide support for the Department's researchers. Estimated fiscal year 2020 research resources beyond the research account are $1,217,000,000.

National Center for Post-traumatic Stress Disorder Research.—The National Center for PTSD sets the VA agenda for research and

education on PTSD, with seven research divisions located at VA facilities. The Center also conducts education and training and coordinates the VA National PTSD Brain Bank. The Committee provides $40,000,000 for the Center in fiscal year 2020, which includes $10,000,000 for the coordination of the VA National PTSD Brain Bank. The Committee encourages the National Center to use funding for the Brain Bank to accelerate the discovery of novel therapeutic targets for the treatment of PTSD utilizing post-mortem brain datasets, cell-based and other models for target identification and validation.

Modeling and Simulation Treatment of PTSD.—As a mechanism to explore treatments for PTSD, the Committee is aware that the use of modeling and simulation technology has enabled the development of innovative and immersive therapies, which can extend trauma management therapy protocol. The Committee encourages the establishment of a Trauma Management Therapy pilot program that utilizes exposure therapy involving virtual reality in combination with group therapy for the treatment of individuals with symptoms relating to PTSD. The Secretary shall submit a report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act, detailing the feasibility of such a pilot program and the metrics required to determine the value of exposure therapy utilizing therapeutic virtual environments using real-time modeling and simulation training to treat PTSD.

Dystonia.—The Committee notes the connection between traumatic brain injury and the onset of dystonia. The Committee continues to urge VA to pursue collaboration with stakeholders to advance critical research on dystonia.

Cannabis Research.—The Committee recognizes that continued focus on the discovery of treatment alternatives for Veterans diagnosed with various conditions, such as chronic pain and PTSD, is essential to reducing the number of Veteran suicides. For this reason, the Energy and Water, Legislative Branch, and Military Construction and Veterans Affairs Appropriations Act, 2019 (P.L. 115–244) urged VA to utilize funds to prioritize investments in research on the efficacy and safety of cannabis usage among the Veteran population for medicinal purposes and submit a report to the Committee no later than 180 days after enactment of that Act. The report has yet to be submitted to the Committee, therefore the Committee directs VA to provide a status update of this outstanding report no later than 15 days after the report is filed.

Access to Clinical Trials.—The Committee applauds the ongoing collaborative efforts between VA medical centers and NCI-designated comprehensive cancer centers that will allow Veterans to have access to the highest quality cancer care available, including cutting-edge clinical trials. The Committee is concerned that States with large Veteran populations are not able to access these treatments. The Committee directs VA to expand these efforts, especially as they relate to providing Veterans access to groundbreaking new treatments through clinical trials led by academic cancer centers, as well as the linking of VA oncology care with national research databases involving patients at multiple academic cancer centers. The Committee commends the work of the NAVIGATE partnership (NCI and VA Interagency Group to Accel-

erate Trials Enrollment) in providing NCI funding for VA health centers, which have already established clinical trials partnerships with academic cancer centers. The Committee is concerned, however, that this partnership does not include certain States with large Veteran populations. To address this need, the Committee directs VA to provide up to $5,000,000 to support the establishment of partnerships between VA hospitals and NCI-designated facilities that allow for Veterans to access cancer clinical trials at VA health centers.

Exposure to Herbicide-Related Toxins.—Veterans have frequently expressed long-held concerns that toxic exposure during their military service is related to adverse health conditions. The Committee is committed to understanding the residual impacts of Agent Orange/Dioxin and other herbicide-related toxic exposures among Veterans who served in Vietnam, Thailand, Guam, the Northern Mariana Islands, America Samoa, and all other geographic areas where these toxic substances were dispersed. The Committee urges the Department to reference data from existing medical records of Veterans to determine the percentage of Veterans from the above referenced subgroup that have more frequent or unexplained diseases compared to the civilian population. This body of data could be helpful in clarifying the extent and specifics of the medical issues suffered by Veterans from exposure to herbicides.

Female Prosthetics Research.—The Committee strongly supports robust funding for medical and prosthetic research. Recognizing that approximately six percent of wounded Veterans returning from Iraq and Afghanistan are amputees, and the number of Veterans accessing VA healthcare for prosthetics and sensory aids continues to increase, this funding greatly enhances Veterans' quality of life. However, there is an acute need for research specializing in female prosthetics, as most prostheses are designed to fit male Veterans. Since three percent of military amputees are female, the Committee directs VA to prioritize medical and prosthetic research to adequately address prosthetics meant for women.

Neural-Enabled Prosthetics.—The Committee understands the uniqueness of limb trauma injuries sustained by servicemembers in combat. Traumatic injury or neurological diseases can also significantly alter or impair the lifestyle of the individual and their caregivers. The Committee encourages VA to fund research that will design and develop technology to offset the effects of limb amputation, orthopedic injury and disease, neuropathic pain, and other neurodegenerative diseases. The Committee directs $25,000,000 for VA to prioritize and fund extramural research that accelerates functional recovery and rehabilitation of sensorimotor function through engineering of wirelessly activated implantable biomedical technologies capable of focal stimulation inside nerves and that is personalized to the needs of the patient.

Gulf War Illness Studies.—The Committee recommends the Department continue to conduct epidemiological studies regarding the prevalence of Gulf War Illness, morbidity, and mortality in Persian Gulf War Veterans and the development of effective treatments, preventions, and cures. The Committee is concerned by the lack of public availability of the findings of all research conducted by or for the Executive Branch relating to the health consequences of military service in the Persian Gulf theater of operations during the

Persian Gulf War, and by the lack of coordination by the Department in ensuring the public availability of this information. The Committee urges the Department to publish disease-specific mortality data related specifically to Persian Gulf War Veterans. The Committee remains concerned by VA's ever-evolving terminology for the signature adverse health outcome of the Persian Gulf War, recognized by the Institute of Medicine (IOM) as Gulf War Illness, and encourages the Department to utilize the term, Gulf War Illness, as IOM has recommended. The Committee continues to urge the Secretary to consider revising and updating the Clinical Practice Guideline for Chronic Multisymptom Illness consistent with the July 2011 Veterans Health Initiative, Caring for Gulf War Veterans, in that it cannot be reliably ascribed to any known psychiatric disorder, and to focus on recent Gulf War Illness treatment research findings and ongoing Gulf War Illness treatment research direction. Furthermore, the Committee once again encourages VA to strengthen the training of primary, specialty, and mental healthcare providers on the Gulf War Illness case definitions recommended by IOM.

Public Access to Scientific Data.—This Committee commends the Department on issuing its Policy and Implementation Plan for Public Access to Scientific Publications and Digital Data from Research Funded by the Department of Veterans Affairs on July 23, 2015. The Committee urges VA to continue its efforts towards full implementation of the plan and requires an update on progress made be included in its fiscal year 2021 budget request.

Ultrasound Guided Regional Anesthesia for Opioid Reduction.—The Committee continues to be concerned about the use of opioids to address pain in the VA Healthcare System. The Committee is aware of several protocols being tested in non-VA hospitals, such as Alternatives to Opioids in the Emergency Department, Enhanced Recovery After Surgery, and the Perioperative Surgical Medical Home. The Committee encourages VA as part of its opioid prevention efforts to provide VA clinicians with resources to study and potentially adopt these and other ultrasound guided regional anesthesia protocols to reduce the number of opioids prescribed and used to treat Veterans' acute and urgent pain.

NICoE Collaboration.—The Committee recognizes the high-quality mental health care and neurological research being conducted at Walter Reed National Intrepid Center of Excellence (NICoE). The Committee directs the Department of Veterans Affairs to strengthen its collaboration with NICoE so VA researchers and health professionals can learn from NICoE's important work and contribution to the health community. The Committee directs VA to submit a report no later than 120 days after enactment of this Act to the Committees on Appropriations of both Houses of Congress on existing collaborative efforts between VA and NICoE and the expansion of such collaborations.

Collaboration on Precision Medicine.—The Committee supports expanding the reach of the Department's research program, such as by partnering with non-federal entities and initiatives and co-locating VA and university biomedical scientists, and encourages the Department to expeditiously seek opportunities for collaboration on precision medicine and other multi-disciplinary research for wounded warriors and other at-risk Veterans.

Hyperbaric Therapy.—The Committee supports continued study of the use of hyperbaric oxygen treatments for Veterans suffering from post-traumatic stress disorder.

Drug Development for Depression and Suicide Prevention.—Depression, post-traumatic stress disorder, and suicide threaten to reach epidemic proportions among America's Veteran warfighters. Recent National Institute of Mental Health clinical trials investigating the use of intravenous Scopolamine to treat depression have shown potentially promising initial results to address this issue and the potential to assist in the prevention of suicide. The Committee encourages the Department to look at all drug development to build upon current research efforts to prevent depression and suicides.

Rapid Cerebral Therapeutic Hypothermia.—Veterans who suffer from brain injury frequently experience long-term cognitive effects. Evidence has demonstrated that immediate cooling of the brain following traumatic injury can reduce brain damage and improve outcomes. The Committee supports the research of rapid cerebral therapeutic hypothermia to lessen the long-term effects of traumatic brain injuries.

Parkinson's Disease Research.—Parkinson's Disease Research, Education and Clinical Centers (PADRECCs) allow for approximately 110,000 United States Veterans diagnosed with Parkinson's disease to receive specialized, multidisciplinary care of the highest quality, leading to improved quality of life and improved health outcomes. The six PADRECCs located throughout the United States have expanded care through a National Consortium that offers specialized Parkinson's disease and movement disorder specialty care in 51 Consortium Centers to Veterans who cannot travel to a PADRECC. The mission of the PADRECCs is to support quality of life by providing comprehensive medical and surgical care to Veteran patients with Parkinson's disease and other movement disorders, advancing investigation into the cause and cure for Parkinson's disease, and enhancing understanding of the disorder through education and research. The Committee strongly supports Parkinson's disease research and encourages the Department to increase funding to PADRECCs to allow the Centers to address the growing and complex needs of the population, while continuing to provide specialized, multidisciplinary care to Veterans diagnosed with Parkinson's disease and other movement disorders.

MEDICAL CARE COLLECTIONS FUND

The Department of Veterans Affairs Medical Care Collections Fund (MCCF) was established by the Balanced Budget Act of 1997 (P.L. 105–33). The Department deposits first-party and pharmacy co-payments, third-party insurance payments and enhanced-use collections, long-term care co-payments, Compensated Work Therapy Program collections, Compensation and Pension Living Expenses Program collections, and Parking Program fees into the MCCF. The Department uses these funds for medical care and services to Veterans. The estimate of fees that will be collected in fiscal year 2020 is $3,912,000,000.

MCCF Third-Party Billing.—Congress remains concerned over potential discrepancies in VA's billing process. Procedures to provide for correct billing and prompt collection must improve at VA.

Therefore, the Department shall submit to Congress a quarterly report identifying the amount of third-party health billings that were owed to VA in the previous quarter and the amount collected. The report shall include billings and collections data for both large claims (greater than $1,000) and small claims (equal to or less than $1,000). In addition, the first quarter report shall include current efforts underway to increase VA's efficiency, accuracy, and collection process, as well as what management practices are in place to provide proper oversight of the billing process, including appeals, so as to eliminate unnecessary and duplicative functions.

NATIONAL CEMETERY ADMINISTRATION

Fiscal year 2019 enacted level	$315,836,000
Fiscal year 2020 budget request	329,000,000
Committee recommendation in the bill	329,000,000
Comparison with:	
Fiscal year 2019 enacted level	13,164,000
Fiscal year 2020 budget request	– – –

The National Cemetery Administration (NCA) was established in accordance with the National Cemeteries Act of 1973 (P.L. 93–43). It has a fourfold mission: to provide for the interment of, in any national cemetery with available grave space, the remains of eligible deceased servicemembers and discharged Veterans, together with their spouses and certain dependents, and to permanently maintain their graves; to provide headstones for, and to mark graves of eligible persons in National, State and Tribal, and private cemeteries; to administer the grant program for aid to States and tribal governments in establishing, expanding, or improving State and tribal government Veterans' cemeteries; and to administer the Presidential Memorial Certificate Program. This appropriation will provide for the operation and maintenance of 144 operational national cemeteries, 11 cemeteries transferred from the Department of the Army, and 33 other cemeterial installations.

The bill includes language making ten percent of the total available until September 30, 2021.

Rural Cemetery Access.—In House Report 112–94 and House Report 115–188 the Committee expressed concern that NCA is not adequately serving the Nation's Veterans in rural areas. The Committee continues to be concerned that there are geographic pockets in the country that are not being served, as VA has failed to meet its goals of having access for all Veterans to a burial option within 75 miles of a Veteran's home. The Committee has previously requested a report on this issue and in fiscal year 2018 requested that GAO examine this issue as well. The Committee remains interested and looks forward to this report no later than 60 days after enactment of this Act.

DEPARTMENTAL ADMINISTRATION

GENERAL ADMINISTRATION

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2019 enacted level	$355,897,000
Fiscal year 2020 budget request	369,200,000
Committee recommendation in the bill	369,200,000
Comparison with:	
Fiscal year 2019 enacted level	13,303,000
Fiscal year 2020 budget request	– – –

The General Administration account provides funds for the Office of the Secretary, seven Assistant Secretaries, and three independent staff offices. The Committee has included bill language to make available through September 30, 2021, up to ten percent of these funds and to permit the transfer of funds in this account to the General Operating Expenses, Veterans Benefits Administration account. Included in this funding is $22,000,000 for the Office of Accountability and Whistleblower Protection. This office was previously funded out of reimbursements, and the recommendation provides a direct funding source to ensure its independence from Department leadership.

VA Five Year Development Plan (VFYDP).—The Committee is very pleased that the Department has provided a VFYDP in its fiscal year 2020 budget. The Committee looks forward to continued annual review of the VFYDP in VA budget submissions.

Quarterly Financial Information Reports.—The bill includes an administrative provision that extends the requirement for submission of the quarterly financial information required in the fiscal year 2017 bill and conference report.

Additional Budgetary Information.—The Committee continues its request that items described in previous House reports continue to be included in the budget justifications submitted each year. Further, the Committee directs VA to include in its budget justification materials a table for each account that shows a five-year funding history, for requested and enacted levels.

Staff Relocations Within VA.—The bill continues the administrative provision requiring written notification 15 days prior to organizational changes that result in the transfer of 25 or more full-time equivalent staff from one organizational unit of the Department to another.

Performance Bonuses.—The Committee feels it is important to know how VA is allocating its resources with regard to performance bonuses. Therefore, the Committee directs VA to submit a report, no later than 90 days after enactment of this Act, which provides the aggregate total of VA performance bonuses covering the five most recent fiscal years for which the data is available. The data should be divided between bonuses for Senior Executive Service (SES) staff and non-SES staff. The report should also include the percentage of SES and non-SES employees who received a bonus and the average dollar amount of the bonuses by grade covering the same time period. The report, however, should not include any personally identifiable information.

Financial Management Business Transformation (FMBT).—The Committee provides $11,900,000 in this account as well as $66,000,000 in the Information Technology Systems account for

FMBT. An additional $107,000,000 will be provided from the VA customer offices through the Franchise Fund. The current legacy financial management system is over 30 years old, and its imminent failure presents significant risks to VA. In the fiscal year 2018 conference report, VA was directed to provide the Committee, on a quarterly basis, a report that compares actual progress on the financial management system to the performance benchmarks and timeline provided in the first report. The Committee continues to expect the Department to continue this quarterly report throughout fiscal year 2020.

Whistleblower Protection.—The Committee reiterates that the purpose of the Department of Veterans Affairs Accountability and Whistleblower Protection Act of 2017 (P.L. 115–41), was to increase accountability and the integrity of Veterans services and care. Public Law 115–41 is not a retaliatory tool for management to use against employees or a means of discrimination against employees who are also Veterans. In order for this legislation to work as intended, it must be applied consistently and as intended, which is why the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115–245) directed the Secretary of Veterans Affairs to provide a report on this matter. Unfortunately, the Committee has yet to receive a report, which is concerning as the congressional intent was to receive information on the application of such authorities to employees organized by wage grade, an assessment of whether such authorities are being disproportionately applied to lower wage grades, as well as the information on the frequency of appeals. In addition, the report was to include demographic data on overall VA workforce terminations since fiscal year 2016. Therefore, the Committee directs the Secretary of Veterans Affairs to provide a status update on this report 15 days after the filing of this report.

Small, Minority- and Women-Owned Businesses.—The Committee recognizes the need for the Department to continue to meet its goals for contracting with minority, disadvantaged, and women-owned businesses. The Committee is concerned that in fiscal years 2016 and 2017, the Department missed its prime contracting goals for women-owned businesses, and businesses in HUBZones. In fiscal year 2016, the Department missed all of its subcontracting goals for women-owned businesses, small disadvantaged businesses, service-disabled Veteran-owned businesses, and businesses in HUBZones. Therefore, the Committee directs the Department to prioritize awarding contracts to contractors that consistently execute approved small business subcontracting plans. The Committee further urges the Department to prioritize minority-owned and disadvantaged contractors and subcontractors. The Committee directs the Department to submit a report, no later than 180 days after enactment of this Act and annually thereafter, detailing the number of contractors that submitted a small business subcontracting plan during the fiscal year. This report shall include an analysis detailing which contractors successfully implemented subcontracting plans and recommendations on how the Department could better achieve its prime and subcontracting goals for small businesses.

Advertising With Small and Disadvantaged Businesses.—The Committee notes that, as the largest advertiser in the United States, the Federal government should work to ensure fair access to its advertising contracts for small disadvantaged businesses and businesses owned by minorities and women. The Committee directs the Department to include the following information concurrent with the fiscal year 2021 budget request: Expenditures for fiscal year 2020 and expected expenditures for fiscal year 2021, respectively, for (1) all contracts for advertising services; and (2) contracts for the advertising services of (i) socially and economically disadvantaged small business concerns (as defined in section 8(a)(4) of the Small Business Act (15 U.S.C. 637(a)(4)); and (ii) women- and minority-owned businesses.

Data on Women and Minority Veterans.—The Committee recognizes the lack of data specific to women and minority Veterans made available to Congress by the Department. The Committee recommends, when applicable, the Secretary of Veterans Affairs display information in the annual report(s) submitted to Congress separately for women Veterans and minority Veterans.

Mail Management.—The Committee notes the GAO report titled, "VA: Actions Needed to More Effectively Manage Outgoing Mail" (GAO–17–581), and requests the Department provide a report on the potential costs and benefits of centralizing its mail management system no later than 180 days after enactment of this Act. The report should include information on innovative information technology platforms that could result in savings and increased efficiency.

BOARD OF VETERANS' APPEALS

Fiscal year 2019 enacted level	$174,748,000
Fiscal year 2020 budget request	182,000,000
Committee recommendation in the bill	182,000,000
Comparison with:	
Fiscal year 2019 enacted level	7,252,000
Fiscal year 2020 budget request	– – –

The bill makes ten percent of this funding available through September 30, 2021.

The Board of Veterans' Appeals (BVA) is the component of VA responsible for making final decisions on behalf of the Secretary for the thousands of claims for Veterans' benefits that are presented to BVA for appellate review. The majority of BVA's workload derives from the benefit claims initiated at VBA regional offices. The appellate process has multiple steps, most of which occur at the local regional office level. If a Veteran is not satisfied with a regional office determination, he or she may appeal to BVA for a final agency decision. BVA adjudicates appeals covering all areas of Veterans' benefits, but most of the workload concerns appeals for Veterans' disability compensation or pension benefits. On February 19, 2019, VA implemented the new legislative framework that modernized the claims and appeals process and provided greater choice to Veterans by providing them three options for claims and appeals: (1) a supplemental claim; (2) a higher-level review; or (3) a direct appeal to the Board of Veterans' Appeals. VA decided 85,000 cases in fiscal year 2018, which was a record level by 25,000 cases, and

was VA's best year since 2009 for efficiencies. VA is on pace to exceed the 2019 goal of 90,050 decisions.

The bill also provides the $4,100,000 as requested in the Information Technology Systems budget to support phase three of the Appeals Modernization initiative. The initiative will convert the Board's 1980s-era case control and locator system to a new, automated integrated community developed suite that is used to process initial disability claims.

INFORMATION TECHNOLOGY SYSTEMS

(INCLUDING TRANSFER OF FUNDS)

Fiscal year 2019 enacted level	$4,103,000,000
Fiscal year 2020 budget request	4,343,000,000
Committee recommendation in the bill	4,343,000,000
Comparison with:	
Fiscal year 2019 enacted level	240,000,000
Fiscal year 2020 budget request	– – –

The Information Technology (IT) Systems account supports IT services such as systems development and performance, operations and maintenance, information protection, and customer support. The program permits the effective and efficient delivery of Veterans' healthcare services and benefits programs.

Within the account total, the Committee allocates in bill language $1,204,238,000 for pay and associated costs, which is equal to the budget request; $2,737,482,000 for operations and maintenance, which is equal to the request; and $401,280,000 for development, which is equal to the request. The bill makes available three percent of pay and associated costs and five percent of operations and maintenance funds until September 30, 2021. All development funds are available until September 30, 2021.

The bill provides $66,000,000 to continue the Financial Management Business Transformation (in addition to the $11,900,000 provided for FMBT in the General Administration account and the $107,000,000 provided out of the Franchise Fund), $36,785,000 for the supply chain management modernization, and $6,000,000 for the VA Center for Innovation to improve existing programs or inform decisions about new programs.

The Committee continues bill language permitting the transfer of funding among the three subaccounts upon approval of the Committees on Appropriations of both Houses of Congress.

The bill contains language allowing for the reprogramming of funds among development projects upon prior notification to, and approval by, the Committees on Appropriations of both Houses of Congress. The bill continues to include language indicating that funds for development are available only for the projects and in the amounts specified in the report accompanying the Act.

The chart below reflects the Committee's recommendation for each development project. This chart will serve as the Department's approved list of development projects, and all requested changes are subject to the reprogramming guidelines as outlined in the accompanying Act.

INFORMATION TECHNOLOGY DEVELOPMENT PROJECTS

(In thousands of dollars)

Project	Committee Recommendation
Clinical Applications	$32,910
Health Management Platforms	80,690
Benefits Systems	136,823
Memorial Affairs	13,877
Other IT Systems	100,480
Cybersecurity	16,600
Information/Infrastructure Management	19,900
Total All Development	401,280

The Committee expects the Office of Information Technology to continue to provide an IT expenditure report to the Committees on Appropriations of both Houses of Congress on a monthly basis. This report shall include a comparison to the project costs included in the development funding chart above and provide an explanation for any differences in excess of $1,000,000.

Information Technology National Standards.—The Committee encourages the Veterans Health Administration to vigilantly pursue the Department of Veterans Affairs national IT goals and do all that is necessary to maintain needed national standards in IT while at the same time meeting short-term local IT needs of individual VA Medical Centers, including maintaining up-to-date security systems and security infrastructure. VHA should solicit, review, and respond in a timely fashion to short-term IT requests from its Medical Centers. The Committee supports keeping on track with beneficial national IT plans and standards, but the Committee also supports serving Veterans well on location in the short run. Long-term IT sync and short-term outstanding service should both be a part of VHA's management strategy.

VETERANS ELECTRONIC HEALTH RECORD (EHR)

Fiscal year 2019 enacted level	$1,107,000,000
Fiscal year 2020 budget request	1,603,000,000
Committee recommendation in the bill	1,603,000,000
Comparison with:	
Fiscal year 2019 enacted level	496,000,000
Fiscal year 2020 budget request	– – –

The Veterans Electronic Health Record is a unified account designed to manage the effort to develop an interoperable electronic health record system that will access seamlessly the records of Veterans in the VA system and those of the Department of Defense and of community providers. The VA system is the same as the one chosen by DOD and is planned to be rolled out with the same timeline and geographic areas as DOD in order to realize cost efficiency savings.

Within the total funding, the bill provides $1,106,500,000 for the electronic health record contract, $161,800,000 for program management, and $334,700,000 for infrastructure support. Funding is made available for three years because of the uncertainty of the timing of obligations in this substantial new effort.

The recommendation includes a rescission of $70,000,000 from unobligated balances in section 250 under Administration Provisions.

The Department has committed in future years to provide approximately 30 percent of the total cost of this ten-year project. The Committee expects that this pledge will be maintained even if there are changes in the Department's leadership.

The bill does not include the transfer language requested by the Administration. This account is intended to be the single source of funding within VA for the electronic health record effort. No authority is provided for funds from other VA accounts to be transferred to this account or for funds from this account to be transferred to other accounts. Consistent with the effort to centralize financial management of the development of the electronic health record, the Committee continues to direct the Department to manage this effort at the headquarters level in the Office of the Deputy Secretary.

The bill language for this account continues to require the Secretary to submit a report quarterly to the Committees on Appropriations of both Houses of Congress detailing obligations, expenditures, and deployment strategy by facility. In addition, bill language is included requiring notice to the Committees on Appropriations of both Houses of Congress on any changes to the deployment schedule. The Committee repeats the fiscal year 2019 directive for GAO to perform quarterly performance reviews of the VA electronic health record deployment. It is expected that this quarterly reporting will provide the Committees and VA with timely information to properly oversee this effort and address important issues. Furthermore, the Committee directs VA to provide quarterly reporting on EHRM obligations.

Medical Records Portability.—The Committee supports Veterans having real-time, seamless, and portable access to all of their medical records and urges VA to develop, as part of EHRM, the means by which Veterans can have secure, portable access to their own medical records.

Cybersecurity Implementation.—The Committee is concerned about the pace at which implementation of cybersecurity best practices are occurring at the Department, especially as VA and DOD continue to integrate electronic health information. The Committee directs the Department to identify for the Committee steps it has taken to protect data and patient records across physical, virtual, and mobile networks and the devices and systems attached to these networks. If such review warrants, the Department should consider a layered defensive strategy that includes perimeter security, segmentation within the data center to increase lateral security, and data and application protections. The Committee also urges VA to ensure that patient records being transferred from DOD to VA have the same level of security and data-level protections as provided by DOD.

Informatics.—In conjunction with the implementation of the EHRM program, the Committee recommends that VA continue to develop and implement, within the Veterans Health Administration, a comprehensive enterprise interoperability and intelligence strategy in order to benefit from advances in the health information technology marketplace for utilization by both Office of Information Technology and Informatics purposes. Such a strategy should include modernized enterprise data and analytics capabilities, a clinical interoperability platform, and open-application pro-

gram interfaces leveraging community healthcare interoperability standards.

Cybersecurity.—Recognizing the cybersecurity challenges of sharing data between the Military Healthcare System GENESIS and the VA EHRM initiative, the Committee urges the Department to explore and invest in modern, software-defined networking and hybrid cloud technologies to ensure that its EHRM network and IT infrastructure will effectively support the Cerner implementation and its subsequent use.

Open Architecture.—The Committee encourages VA to ensure the new EHR initiative provides an open architecture that allows a governance and oversight process for administering access and support to deploy third-party applications, components, and application programming interfaces to ensure longevity of the EHR platform and requests information on the EHRM architecture be included in quarterly reports.

Clinical Workflow Challenges.—The Committee is concerned about the significant amount of time clinicians spend on the current electronic health record documentation in their treatment of Veterans, as well as their inability to easily incorporate such information from within the Veterans' continuum of care, particularly the community care environment. This administrative burden also means clinicians have less time to spend providing care to each patient and fewer patients are seen in a given day, resulting in long wait times for Veterans. VA's ongoing efforts with EHRM and interoperability with the Department of Defense provide an opportunity to assess innovative technologies' ability to solve this challenge. The EHRM technology must enhance clinicians' efficacy so they can spend more time with patients. The Committee commends the Department's efforts to involve clinicians at all stages of the EHRM rollout and encourages the continued collaboration with clinicians to ensure the most efficient workflow solutions are developed with clinician input.

Health Navigator.—Section 731 of the National Defense Authorization Act for Fiscal Year 2018 (P.L. 115–91) required the Secretary of Defense to conduct a pilot program to improve health outcomes and patient experience for beneficiaries with complex medical conditions. The Committee believes that VA should conduct a similar pilot. VA is encouraged to conduct this pilot in a VA Region where it can operate in tandem with DOD's rollout of the EHR platform and the Defense Health Agency's pilot project as directed in Section 731 of Public Law 115–91.

OFFICE OF INSPECTOR GENERAL

Fiscal year 2019 enacted level	$192,000,000
Fiscal year 2020 budget request	207,000,000
Committee recommendation in the bill	222,000,000
Comparison with:	
Fiscal year 2019 enacted level	30,000,000
Fiscal year 2020 budget request	15,000,000

The Office of Inspector General (OIG) was established by the Inspector General Act of 1978 and is responsible for the audit, investigation, and inspection of all VA programs and operations. The overall operational objective is to focus available resources on areas that would help improve services to Veterans and their beneficiaries, assist managers of Department programs to operate eco-

nomically in accomplishing program goals, and to prevent and deter recurring and potential fraud, waste, and inefficiencies.

The bill makes up to ten percent of this funding available until September 30, 2021.

The Committee provides an additional $15,000,000 above the budget request to ensure robust oversight by OIG of MISSION Act and EHRM implementation.

CONSTRUCTION, MAJOR PROJECTS

Fiscal year 2019 enacted level	$1,127,486,000
Fiscal year 2020 budget request	1,235,200,000
Committee recommendation in the bill	1,235,200,000
Comparison with:	
Fiscal year 2019 enacted level	107,714,000
Fiscal year 2020 budget request	– – –

The Construction, Major Projects appropriation provides for constructing, altering, extending, and improving any of the facilities under the jurisdiction or for the use of VA, including planning, architectural and engineering services, assessments, and site acquisition where the estimated cost of a project is more than $20,000,000.

The Committee recommendation makes all but $480,000,000 of these funds available for a five-year period.

In past years, this appropriations bill repeated language that is in permanent law requiring that all major construction projects costing more than $100,000,000 be managed by a non-VA government entity such as the Army Corps of Engineers. Because this policy is now well-established, the Committee no longer feels a need to duplicate the language. However, the Committee intends to continue its oversight of the quality of the outside entity management and will continue to receive quarterly briefings on each of the large construction projects.

The chart below reflects the Committee's recommendation for Major Construction projects.

CONSTRUCTION, MAJOR PROJECTS

(In thousands of dollars)

Location	Description	Committee Recommendation
VHA:		
New York, NY, Manhattan VAMC	Flood Recovery	150,000
Bay Pines, FL	Inpatient/Outpatient Improvements	30,000
San Juan, PR	Seismic Corrections—Building #1	30,000
San Diego, CA	SCI & Seismic Corrections	20,000
Reno, NV	Correct Seismic Deficiencies & Expand Clinical Services Building.	10,000
Louisville, KY	New Medical Facility	410,000
West Los Angeles, CA	Build New Critical Care Center	25,000
Alameda, CA	Outpatient Clinic & National Cemetery	26,000
Advance Planning and Design Fund	Various Locations	72,000
Asbestos:	Various Locations	12,000
Major Construction Staff:	Various Locations	88,700
Judgment Fund:	Various Locations	25,000
Non-Dept. Fed. Entity Project Management Support	Various Locations	120,000
Seismic Corrections:	Various Locations	35,000
Total VHA		1,053,700
National Cemetery Admin. (NCA):		
Bayamon, PR	Replacement Cemetery (Morovis)	10,000
Riverside, CA	Gravesite Expansion & Cemetery Improvements.	3,000

CONSTRUCTION, MAJOR PROJECTS—Continued

(In thousands of dollars)

Location	Description	Committee Recommendation
Elmira, NY	Western New York Cemetery	10,000
Houston, TX	Gravesite Expansion	34,000
Bourne, MA	Massachusetts Phase 4 Expansion	32,000
Dallas, TX	Dallas National Cemetery Expansion	28,000
Advance Planning and Design Fund		35,000
NCA Land Acquisition		20,000
Total, NCA		172,000
General Admin.:	Staff Offices Advance Planning Fund	9,500
Major Construction Total		1,235,200

To enhance the Committee's capacity to conduct oversight on VA's facility construction efforts, several administrative provisions are continued in the bill: (1) No funding amount greater than $7,000,000 may be reprogrammed between construction projects unless approved by the Committees on Appropriations of both Houses of Congress; (2) any change to the scope of a construction project is not permitted without the approval of the Committees; and (3) VA must report any bid savings of $5,000,000 or more on projects as soon as they are identified.

Budget Justification Documents.—The Committee reminds the Department of the requirement in section 258 of Division A of the Continuing Appropriations and Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2017, and Zika Response and Preparedness Act (P.L. 114–223) regarding specific materials to be included in Major Construction budget justification documents for fiscal year 2017 and each fiscal year thereafter.

Joint VA and U.S. Army Corps of Engineers Projects.—The Committee is concerned the Department projects under management of the United States Army Corps of Engineers (USACE) may experience unecessary administrative delays during the initial transitional phase between projects being authorized and appropriated by Congress and an interagency agreement being signed by VA and USACE. Accordingly, no later than 60 days after enactment of this Act, the Committee directs VA to provide monthly updates on all current and subsequent VA construction projects worth more than $100,000,000, and jointly managed by VA and USACE. Regular reports for certain projects may be submitted on a quarterly basis if the Department and Committee come to an agreement that more frequent reports are not necessary.

Research Facilities Infrastructure Report.—In fiscal year 2006, the Committee directed VA to conduct a comprehensive review of its research facilities and report to Congress on the deficiencies found and suggestions for correction. VA released its initial review in 2012, and recently completed Phase II assessments of a subset of those facilities. The Committee directs VA to submit the completed Phase II research facilities infrastructure report updates to the Committees on Appropriations of both Houses of Congress no later than October 1, 2019.

CONSTRUCTION, MINOR PROJECTS

Fiscal year 2019 enacted level	$649,514,000
Fiscal year 2020 budget request	398,800,000
Committee recommendation in the bill	421,117,000
Comparison with:	
Fiscal year 2019 enacted level	(228,397,000)
Fiscal year 2020 budget request	22,317,000

The Construction, Minor Projects appropriation provides for constructing, altering, extending, and improving any of the facilities under the jurisdiction of, or for the use of, the Department, including planning, assessment of needs, architectural and engineering services, and site acquisition, where the estimated cost of a project is equal to or less than $20,000,000.

As with the Major Construction account, the Committee recommendation makes these funds available for a five-year period.

Within the amounts provided, the Committee directs $22,317,000 for the construction related to expanding gender-specific care for women and mental health programs.

The recommendation includes $150,000,000 in additional funding in section 243 under Administration Provisions for minor construction projects.

Construction of Housing for Rural Homeless Veterans.—The Department has made great efforts to find suitable housing for homeless Veterans and their families. The Committee encourages more non-traditional efforts to eliminate Veteran homelessness. For example, some cities and towns have started pilot programs using "Micro" or "Tiny Homes" to help deal with homelessness. The Committee encourages VA to continue its efforts to house homeless Veterans and their families and explore the feasibility of providing "Tiny Homes".

GRANTS FOR CONSTRUCTION OF STATE EXTENDED CARE FACILITIES

Fiscal year 2019 enacted level	$150,000,000
Fiscal year 2020 budget request	90,000,000
Committee recommendation in the bill	150,000,000
Comparison with:	
Fiscal year 2019 enacted level	– – –
Fiscal year 2020 budget request	60,000,000

This appropriation provides grants to assist States to construct State home facilities, for furnishing domiciliary or nursing home care to Veterans, and to expand, remodel, or alter existing buildings for furnishing domiciliary, nursing home, or hospital care to Veterans in State homes. A grant may not exceed 65 percent of the total cost of the project. The bill makes this funding available until expended.

GRANTS FOR CONSTRUCTION OF VETERANS CEMETERIES

Fiscal year 2019 enacted level	$45,000,000
Fiscal year 2020 budget request	45,000,000
Committee recommendation in the bill	45,000,000
Comparison with:	
Fiscal year 2019 enacted level	– – –
Fiscal year 2020 budget request	– – –

This program provides grants to assist States and tribal governments with the establishment, expansion, and improvement of Veterans' cemeteries that are operated and permanently maintained

by the States and tribal governments. Grants under this program fund up to 100 percent of construction costs and the initial equipment expenses when the cemetery is established. State and tribal governments remain responsible for providing the land and for paying all costs related to the operation and maintenance of the State cemeteries, including the costs for subsequent equipment purchases. The bill makes this funding available until expended.

ADMINISTRATIVE PROVISIONS

The bill includes 52 administrative provisions, of which 47 were in effect in fiscal year 2019 in some form and 5 are new provisions. The administrative provisions included in the bill are as follows:

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 201 allowing for the transfer of funds among three mandatory appropriations. The Administration proposal to modify this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 202 allowing the Department to transfer funding among the four medical appropriations accounts in fiscal year 2020. The Administration proposal to modify this provision is not adopted.

The bill includes section 203 allowing for salaries and expenses funds to be used for hire of passenger vehicles, lease of facilities or land, and purchase of uniforms.

The bill includes section 204 providing that only funding in "Construction, Major Projects" and "Construction, Minor Projects" can be used for the purchase of any site for any new hospital or home or to construct any new hospital or home.

The bill includes section 205 requiring the Department to be reimbursed for medical services it provides to any person not defined as a beneficiary to ensure the Department is receiving payment for all medical services provided.

The bill includes section 206 allowing for the use of funds appropriated in fiscal year 2020 for "Compensation and Pensions", "Readjustment Benefits", and "Veterans Insurance and Indemnities" for payment of accrued obligations recorded in the last quarter of fiscal year 2019.

The bill includes section 207 allowing for the use of fiscal year 2020 funds to pay prior year obligations resulting from implementation of sections 3328(a), 3334, and 3712(a) of title 31, United States Code.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 208 allowing the Department to use surplus earnings from the national service life insurance, U.S. Government life insurance, and Veterans' special life insurance program to administer these programs.

The bill includes section 209 allowing the Department to obligate enhanced-use lease proceeds for administrative expenses that were incurred in a prior fiscal year during the year funds are received.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 210 limiting the amount of reimbursement the Office of Resolution Management, the Office of Employment Discrimination Complaint Adjudication, and the Office of Diversity and Inclusion can charge other offices and accounts of the Department for services provided.

The bill includes section 211 requiring the Department to collect current and accurate third-party reimbursement information for the purposes of third-party insurance collections. If persons receiving care or medical services do not disclose this information, the Department is allowed to bill them reasonable charges for services provided.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 212 allowing the Department to use enhanced-use lease funds for construction and alteration of medical facilities.

The bill includes section 213 allowing the Department to use the Medical Services appropriation for expenses related to the broader mission of medical care to Veterans.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 214 allowing the Department to transfer Medical Care Collections to the "Medical Services" and "Medical Community Care" accounts to be used for Veterans medical care and makes those funds available until expended.

The bill includes section 215 allowing Veterans who reside in Alaska to obtain medical services from medical facilities supported by the Indian Health Service or tribal organizations, and provides for reimbursement for those services from VA.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 216 allowing the Department to transfer the proceeds received from the transfer of real property deposited into the VA Capital Asset Fund to the Major and Minor Construction appropriations accounts and makes those funds available until expended.

The bill includes section 217 requiring the Secretary to submit quarterly reports to the Committees on Appropriations of both Houses of Congress on the financial status of the Veterans Health Administration.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 218 prohibiting the Department from increasing total resources of the Information Technology appropriation by more than ten percent by transferring funding from the other VA accounts and requires the Department to receive approval from the Committees on Appropriations of both Houses of Congress before such transfer. The Administration proposal to modify this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 219 providing up to $314,409,000 of fiscal year 2020 funds for transfer to the Joint DOD–VA Medical Facility Demonstration Fund. Additional funding may be transferred from these accounts upon written notification to the Committees on Appropriations of both Houses of Congress.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 220 permitting the transfer of $322,931,000 of fiscal year 2020 funding appropriated for medical accounts to the Joint DOD–VA Medical Facility Demonstration Fund for the operation of facilities designated as combined Federal medical facilities.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 221 permitting the transfer of funds deposited in the Medical Care Collections Fund to the Joint DOD–VA Medical Facility Demonstration Fund for facilities designated as combined federal medical facilities.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 222 directing that a minimum of $15,000,000 shall be transferred from the four medical care appropriations to the Department of Defense/Department of Veterans Affairs Health Care Sharing Incentive Fund, to be available until expended.

The bill includes section 223 requiring the Secretary to notify the Committees on Appropriations of both Houses of Congress of all bid savings when identified in Major Construction projects that total at least $5,000,000 or five percent of the programmed amount of the project. The Administration proposal to delete this provision is not adopted.

The bill includes section 224 prohibiting the original scope of work for a Major Construction project from being increased above the scope specified for that project in the original justification data provided to Congress unless approved by the Committees on Appropriations of both Houses of Congress. The Administration proposal to delete this provision is not adopted.

The bill includes section 225 requiring a quarterly report from each VBA regional office on pending disability claims, both initial and supplemental; error rates; the number of claims processing personnel; corrective actions taken; training programs; and review team audit results. In addition, the bill requires quarterly reporting on pending appeals at VBA, as well as BVA. The Administration proposal to delete this provision is not adopted.

The bill includes section 226 requiring advance written notification to the Committees on Appropriations of both Houses of Congress 15 days prior to organizational changes which result in the transfer of 25 or more full-time equivalent staff from one organizational unit to another. The Administration proposal to delete this provision is not adopted.

The bill includes section 227 requiring the Secretary to provide, on a quarterly basis to the Committees on Appropriations of both Houses of Congress, notification of any single national outreach

and awareness marketing campaign in which obligations exceed $1,000,000. The Administration proposal to delete this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 228 permitting the transfer to "Medical Services" from any discretionary program except "General Operating Expenses, Veterans Benefits Administration" upon approval of the Committees on Appropriations of both Houses of Congress. This provision is intended to give VA flexibility as it administers the changes to its traditional healthcare program and the MISSION Act. The budget request to modify this provision is not adopted.

(INCLUDING TRANSFER OF FUNDS)

The bill includes section 229 permitting the transfer of funds between the "Board of Veterans Appeals" and "General Operating Expenses, Veterans Benefits Administration" upon approval of the Appropriations Committees on Appropriations of both Houses of Congress. The budget request to modify this provision is not adopted.

The bill includes section 230 prohibiting the reprogramming of funds exceeding $7,000,000 among the Major Construction projects unless the Committees on Appropriations of both Houses of Congress approve the request. The Administration proposal to delete this provision is not adopted.

The bill includes section 231 requiring the Secretary to ensure that the toll-free suicide hotline provides immediate assistance from a trained professional and adheres to all requirements of the American Association of Suicidology. The Administration request to delete this provision is not adopted.

The bill includes section 232 restricting funds from being used to close certain medical facilities in the absence of a national realignment strategy. The Administration request to delete this provision is not adopted.

The bill includes section 233 requiring VA to use the mammography screening guidelines announced by the Secretary on May 10, 2017 through January 1, 2024. The Administration request to delete this provision is not adopted.

The bill includes section 234 permanently allowing the use of Medical Services funding for assisted reproductive technology treatment and adoption reimbursement for Veterans and their spouses if the Veteran has a service-connected disability that results in being unable to procreate without such fertility treatment.

The bill includes section 235 prohibiting any funds from being used in a manner that is inconsistent with statutory limitations on outsourcing.

The bill includes section 236 pertaining to exceptions for Indian- or Native Hawaiian-owned businesses contracting with VA. The Administration request to delete this provision is not adopted.

The bill includes section 237 directing the elimination over a series of years of the use of Social Security numbers in VA programs. The Administration request to delete this provision is not adopted.

The bill includes section 238 referencing the provision in the Continuing Appropriations and Military Construction, Veterans Af-

fairs, and Related Agencies Appropriations Act, 2017, and Zika Response and Preparedness Act (P.L. 114–223) pertaining to certification of marriage and family therapists. The Administration request to delete this provision is not adopted.

The bill includes section 239 which prohibits funds from being used to transfer funding from the Filipino Veterans Equity Compensation Fund to any other VA account. The Administration request to delete this provision is not adopted.

The bill includes section 240 permitting funding to be used in fiscal years 2020 and 2021 to carry out and expand the childcare pilot program authorized by section 205 of the Caregivers and Veterans Omnibus Health Services Act of 2010 (P.L. 111–163).

The bill includes section 241 prohibiting VA from using funds to enter into an agreement to resolve a dispute or claim with an individual that would restrict the individual from speaking to Members of Congress or their staff on any topic, except those required to be kept secret in the interest of national defense or the conduct of foreign affairs. The Administration request to delete this provision is not adopted.

The bill includes section 242 referencing language in the Continuing Appropriations and Military Construction, Veterans Affairs, and Related Agencies Appropriations Act, 2017, and Zika Response and Preparedness Act (P.L. 114–223) requiring certain data to be included in budget justifications for major construction projects. The Administration request to delete this provision is not adopted.

The bill includes section 243 providing $1,000,000,000 to be available until expended for VA infrastructure needs, of which $850,000,000 is for seismic improvement projects and seismic management activities and $150,000,000 is for Minor Construction. This funding is not made available until VA provides and the Committees on Appropriations of both Houses of Congress approve a detailed expenditure plan.

The bill includes section 244 prohibiting the use of funds to deny the Inspector General timely access to information, unless a provision of law expressly refers to the Inspector General and expressly limits such access. The Administration request to delete this provision is not adopted.

The bill includes section 245 prohibiting funding from being used in a manner that would increase wait times for Veterans at medical facilities. The Administration request to delete this provision is not adopted.

The bill includes section 246 prohibiting the use of funds in fiscal year 2020 to convert any program that received specific purpose funds in fiscal year 2019 to a general purpose-funded program without the approval of the Committees on Appropriations of both Houses of Congress at least 30 days prior to any such action. The Administration request to delete this provision is not adopted.

The bill includes section 247 eliminating category D or E pain testing on dogs.

The bill includes section 248 prohibiting the closure of the CBOC in Bainbridge, New York until the Secretary submits a completed market area assessment to the Committees on Appropriations of both Houses of Congress.

The bill includes section 249 requiring the Department to update the Planning and Activating CBOC handbook every five years and provide guidance and training to employees on each update of the handbook.

(INCLUDING RESCISSION OF FUNDS)

The bill includes section 250 rescinding $70,000,000 of unobligated fiscal year 2019 funding for the Veterans Electronic Health Record account.

The bill includes section 251 extending the VSO wellness pilot program authorized in section 252 of the Consolidated Appropriations Act, 2018 (P.L. 155–141) until 2022.

TITLE III

RELATED AGENCIES

Funds under Title III support the agencies that honor and respect the service of our Nation's heroes. Though it may be a smaller title of the bill, the agencies funded under Title III are the public face of America's commitment to our servicemembers and Veterans. The American Battle Monuments Commission and Arlington Cemetery commemorate those who made the ultimate sacrifice, while the Armed Forces Retirement Home and the United States Court of Appeals for Veterans Claims are critical parts of keeping our promise to serve those who served our Nation.

The Committee is disappointed that these agencies are kept largely flat funded in their requests by the Office of Management and Budget (OMB), despite the very real needs of these agencies. The Committee expects OMB to provide budget requests that properly reflect the needs of these agencies, not to shortchange these critical agencies under the guise of fiscal responsibility.

AMERICAN BATTLE MONUMENTS COMMISSION

SALARIES AND EXPENSES

The recommendation includes $104,000,000 for Salaries and Expenses of the ABMC, an increase of $28,900,000 above the request to support ABMC's unfunded requirements for high-priority projects.

The Committee notes the significant maintenance needs of the American Battle Monuments around the world, which are specifically designed to honor our fallen servicemembers. The Committee directs ABMC to emphasize maintaining and repairing these monuments and memorials in a proactive and timely manner that honors the service, achievements, and sacrifices of the United States Armed Forces.

World War I Memorial Preservation.—The Committee supports the preservation and rehabilitation of World War I memorials across the country and in Europe to honor the more than four million men and women who bravely served the United States and fought to preserve our freedom.

FOREIGN CURRENCY FLUCTUATIONS ACCOUNT

The recommendation includes such sums as necessary for the Foreign Currency Fluctuations Account.

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS

SALARIES AND EXPENSES

The recommendation includes $35,400,000 for Salaries and Expenses for the United States Court of Appeals for Veterans Claims (the Court). The Consolidated Appropriations Act, 2018 (P.L. 115–141) included bill language requiring a feasibility study before the purchase of a new courthouse. The study has not been completed, and the Committee does not support the Court using the requested fiscal year 2020 funds for this purpose. Instead, the Committee directs the Court to use the $800,000 to address its growing caseload.

Caseload.—The Committee is concerned about indications of a growing caseload at the Court, particularly as the Court has now received authority to hear class action litigation. While reforms have recently been enacted that may slow this increase, the Committee acknowledges that the Court may need additional resources in the future, potentially including additional judges, to meet the caseload needs.

DEPARTMENT OF DEFENSE CIVIL CEMETERIAL EXPENSES, ARMY

SALARIES AND EXPENSES

The recommendation includes $80,800,000 for Salaries and Expenses for Arlington National Cemetery (the Cemetery), which is $10,000,000 above the fiscal year 2020 budget request. The Committee has provided this additional $10,000,000 to maintain current services, as was previously identified as a need during the fiscal year 2019 cycle.

CONSTRUCTION

The recommendation includes $131,000,000 for planning and design and construction of Southern Expansion to remain available until expended.

Southern Expansion.—The recommendation includes $131,000,000 for planning and design and construction of Southern Expansion to remain available until expended. This will complete the anticipated $350,000,000 cost of the Southern Expansion and road realignments to extend the life of the cemetery. The Committee provides this funding to ensure that the life of our Nation's most prestigious cemetery is extended into the 2050 timeframe.

Updated Interment Policy.—The Committee notes that the National Defense Authorization Act for Fiscal Year 2019 (P.L. 115–232) required the Secretary of the Army to revise criteria for interment at Arlington National Cemetery to preserve the Cemetery as an active burial ground well into the future. The Committee understands that the Secretary is currently reviewing proposals and notes that it will be following closely to ensure that the Cemetery can continue to live up to its mission to honor those who have served.

ARMED FORCES RETIREMENT HOME

TRUST FUND

The recommendation includes $70,300,000 for the Armed Forces Retirement Home (AFRH), an increase of $6,000,000 above the requested amount, although $22,000,000 of the total is provided from the general fund of the Treasury, and not the Trust Fund. The Committee provides this increase to keep pace with anticipated personnel costs and contract cost inflation, as well as to support urgently needed capital maintenance and other improvements, in particular, infrastructure related to the health and safety of AFRH residents. The Committee understands that deferred maintenance projects are in critical need of attention, and provides this funding as a clear statement of priorities for future budget requests.

General Fund.—The Committee has previously expressed concern about the use of the General Fund to support the work of AFRH. The Committee is pleased that efforts are underway to increase revenues and stabilize the AFRH Trust Fund for the long term, and directs AFRH to continue to make progress in this area and report to the Committee on its further initiatives to improve sustainability and maintain the high-quality services provided to AFRH residents.

Land Redevelopment.—The Committee understands that AFRH has issued a request for proposals to redevelop the 80-acre master planned parcel on the Washington campus, and looks forward to seeing the selection process conducted in a fair, open, and transparent manner without undue outside influence. AFRH is directed to report to the Committee on the status of the selection process and resulting lease negotiations.

Administrative Provision

The bill includes one provision that was in effect in fiscal year 2019. The administrative provision included in the bill is as follows:

The bill includes section 301 permitting funds from concessions at Army National Military Cemeteries to be used to support activities at the Cemeteries.

TITLE IV

OVERSEAS CONTINGENCY OPERATIONS

DEPARTMENT OF DEFENSE

Fiscal year 2019 enacted level	$921,000,000
Fiscal year 2020 budget request	9,844,526,000
Committee recommendation in the bill	921,000,000
Comparison with:	
Fiscal year 2019 enacted level	– – –
Fiscal year 2020 budget request	(8,923,526,000)

The recommendation includes Overseas Contingency Operations for military construction projects and planning and design related to the European Deterrence Initiative (EDI).

MILITARY CONSTRUCTION, ARMY

The recommendation includes $156,860,000 for Army military construction and planning and design for Overseas Contingency Operations and European Deterrence Initiative projects.

The recommendation does not include $88,500,000 as requested for the High-Value Detention Facility replacement at Guantanamo Bay, Cuba.

The recommendation does not include $7,200,000,000 for a border wall as requested by the Administration.

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The recommendation includes $281,576,000 for Navy and Marine Corps military construction and planning and design for European Deterrence Initiative projects.

MILITARY CONSTRUCTION, AIR FORCE

The recommendation includes $436,564,000 for Air Force military construction and planning and design for European Deterrence Initiative projects.

MILITARY CONSTRUCTION, DEFENSE-WIDE

The recommendation includes $46,000,000 for Defense-Wide Overseas Contingency Operations and planning and design for European Deterrence Initiative projects.

ADMINISTRATIVE PROVISION

The bill includes one provision that was in effect in fiscal year 2019.

The bill includes section 401 that designates that funding shall be available only if the President so designates all amounts and transmits such designations to Congress.

TITLE V

NATURAL DISASTER RELIEF

DEPARTMENT OF DEFENSE

Fiscal year 2019 enacted level	– – –
Fiscal year 2020 budget request	$9,200,000,000
Committee recommendation in the bill	2,300,000,000
Comparison with:	
Fiscal year 2019 enacted level	2,300,000,000
Fiscal year 2020 budget request	(6,900,000,000)

MILITARY CONSTRUCTION, NAVY AND MARINE CORPS

The recommendation includes $1,210,948,000 for Navy and Marine Corps military construction and planning and design for damages related to Hurricanes Florence and Michael.

MILITARY CONSTRUCTION, AIR FORCE

The recommendation includes $1,035,752,000 for Air Force military construction and planning and design for damages related to Hurricanes Florence and Michael and 2019 flooding.

MILITARY CONSTRUCTION, ARMY NATIONAL GUARD

The recommendation includes $50,000,000 for Army National Guard military construction and planning and design for damages related to Hurricanes Florence and Michael.

MILITARY CONSTRUCTION, ARMY RESERVE

The recommendation includes $3,300,000 for Army Reserve military construction and planning and design for damages related to Hurricanes Florence and Michael.

ADMINISTRATIVE PROVISION

The bill includes one new Administrative Provision.

The bill includes section 501 that designates that funding shall be available only if the President so designates all amounts and transmits such designation to Congress and requires a spend plan.

TITLE VI

GENERAL PROVISIONS

The bill includes a total of 14 provisions: 11 provisions that are effective in fiscal year 2019:

The bill includes section 601 prohibiting the obligation of funds beyond the current fiscal year unless expressly so provided.

The bill includes section 602 prohibiting the use of funds for programs, projects or activities not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

The bill includes section 603 encouraging all departments and agencies funded in this Act to expand the use of "E-Commerce" technologies and procedures.

The bill includes section 604 specifying the Congressional committees that are to receive all reports and notifications.

The bill includes section 605 prohibiting the transfer of funds to any instrumentality of the United States Government without authority from an appropriations Act.

The bill includes section 606 prohibiting any funds in this Act to be used for a project or program named for an individual serving as a Member, Delegate, or Resident Commissioner of the United States House of Representatives.

The bill includes section 607 requiring all reports submitted to the Congress to be posted on official websites of the submitting agency.

The bill includes section 608 prohibiting the use of funds to establish or maintain a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, except for law enforcement investigation, prosecution or adjudication activities.

The bill includes section 609 prohibiting the use of funds for payment of first-class travel by an employee of the executive branch.

The bill includes section 610 prohibiting the use of funds in this Act for any contract where the contractor has not complied with E-Verify requirements.

The bill includes section 611 prohibiting the use of funds in this Act by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum—Federal Fleet Performance, dated May 24, 2011.

The bill includes section 612 prohibiting the use of funds in this Act and previous Acts for the construction of a wall, barrier, fence, or road along the Southern border of the United States or a road to provide access to a wall, barrier, or fence constructed along the Southern border of the United States.

The bill includes section 613 prohibiting childcare centers, agencies, or providers to employ an individual convicted of a sex offense, an offense involving a child victim, or a violent crime.

The bill includes section 614 prohibiting funds to be used to replace or diminish the quality of care provided by the TRICARE program.

HOUSE OF REPRESENTATIVES REPORT REQUIREMENTS

The following items are included in accordance with various requirements of the Rules of the House of Representatives.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the following is a statement of general performance goals and objectives for which this measure authorizes funding:

The Committee on Appropriations considers program performance, including a program's success in developing and attaining outcome-related goals and objectives, in developing funding recommendations.

RESCISSIONS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following table lists the rescissions in the accompanying bill:

DEPARTMENT/ACTIVITY	AMOUNTS RECOMMENDED FOR RESCISSION
Department of Defense, Military Construction, Defense-Wide (Sec. 125)	$45,055,000
Department of Veterans Affairs, Departmental Administration, Veterans Electronic Health Record (Sec. 250)	$70,000,000

TRANSFER OF FUNDS

Pursuant to clause 3(f)(2) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the transfer of funds provided in the accompanying bill.

Language is included that allows transfer of funds from "Military Construction, Defense-Wide" to other military construction accounts and family housing.

Language is included to allow for the transfer of funds from Family Housing, Construction accounts to the Department of Defense Family Housing Improvement Fund and funds from Military

Construction accounts to the Department of Defense Military Unaccompanied Housing Improvement Fund.

Language is included to provide transfer authority from the BRAC account to the Homeowners Assistance Program.

Language is included to allow the transfer of expired funds to the "Foreign Currency Fluctuations, Construction, Defense" account.

Language is included to allow the transfer of funds among projects and activities in accordance with reprogramming guidelines.

Language is included to transfer not to exceed $18,147,000 in fiscal year 2021 from Compensation and Pensions to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems. These funds are for the administrative costs of implementing cost-savings proposals required by the Omnibus Budget Reconciliation Act of 1990 and the Veterans' Benefits Act of 1992. Language is also included transferring funds to the medical care collections fund to augment funding of medical facilities for nursing home care provided to pensioners.

Language is included to permit the transfer of funds from General Administration to General Operating Expenses, Veterans Benefits Administration.

Language is included to permit the transfer of funds between Information Technology Systems development projects and among the three sub-accounts identified in bill language subject to the approval of the Committee.

Language is included to provide authority for the Department of Veterans Affairs for any funds appropriated in 2020 for Compensation and Pensions, Readjustment Benefits, and Veterans Insurance and Indemnities to be transferred among those three accounts.

Language is included to transfer funds among the Medical Services, Medical Community Care, Medical Support and Compliance, and Medical Facilities accounts.

Language is included to permit the funds from three life insurance funds to be transferred to General Operating Expenses, Veterans Benefits Administration and Information Technology Systems for the costs of administering such programs.

Language is included to permit funding up to $67,891,000 to be transferred to General Administration and Information Technology Systems from any funds appropriated in fiscal year 2020 to reimburse four headquarters offices for services provided.

Language is included to transfer certain funds derived from enhanced-use leasing activities to the Construction, Major Projects and Construction, Minor Projects accounts.

Language is included to transfer funds from the Medical Care Collections Fund to the Medical Services and Medical Community Care accounts.

Language is included to allow the transfer of funds from the Capital Asset Fund to the Construction, Major Projects and Construction, Minor Projects accounts.

Language is included to allow the transfer of funds from various accounts to the Information Technology Systems account in an aggregate amount not to exceed ten percent of the account appropriation, subject to approval by the Committee.

Language is included to allow the transfer of funds in fiscal year 2020 provided for the Department of Veterans Affairs to the Joint

Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund.

Language is included allowing fiscal year 2021 medical care funding to be transferred to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration fund.

Language is included permitting funds deposited to the Medical Care Collections Fund for healthcare provided at a combined Federal medical facility to be transferred to the Joint Department of Defense-Department of Veterans Affairs Medical Facility Demonstration Fund.

Language is included under the Department of Veterans Affairs that would transfer no less than $15,000,000 for the DOD–VA Health Care Sharing Incentive Fund as authorized by section 8111(d) of title 38, United States Code.

Language is included that permits the transfer from all discretionary accounts except General Operating Expenses, Veterans Benefits Administration, to Medical Services, subject to approval by the Committee.

Language is included that permits transfer of funds between General Operating Expenses, Veterans Benefits Administration and the Board of Veterans Appeals, subject to approval by the Committee.

DISCLOSURE OF EARMARKS AND CONGRESSIONALLY DIRECTED SPENDING ITEMS

Neither the bill nor the report contains any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI.

COMPLIANCE WITH RULE XIII, CL. 3(e) (RAMSEYER RULE)

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

SECTION 220 OF THE MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT, 2019

[SEC. 220. Of the amounts appropriated to the Department of Veterans Affairs which become available on October 1, 2019, for "Medical Services", "Medical Community Care", "Medical Support and Compliance", and "Medical Facilities", up to $307,609,000, plus reimbursements, may be transferred to the Joint Department of Defense—Department of Veterans Affairs Medical Facility Demonstration Fund, established by section 1704 of the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111–84; 123 Stat. 3571) and may be used for operation of the facilities designated as combined Federal medical facilities as described by section 706 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009 (Public Law 110–417; 122 Stat. 4500): Provided, That additional funds may be transferred from accounts designated in this section to the Joint Department of Defense—De-

partment of Veterans Affairs Medical Facility Demonstration Fund upon written notification by the Secretary of Veterans Affairs to the Committees on Appropriations of both Houses of Congress.]

TITLE 38, UNITED STATES CODE

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PART II—GENERAL BENEFITS

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CHAPTER 17—HOSPITAL, NURSING HOME, DOMICILIARY, AND MEDICAL CARE

SUBCHAPTER I—GENERAL

Sec.
1701. Definitions.

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SUBCHAPTER II—HOSPITAL, NURSING HOME, OR DOMICILIARY CARE AND MEDICAL TREATMENT

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1720J. Provision of assisted reproductive technology or adoption reimbursements for certain disabled veterans.

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SUBCHAPTER II—HOSPITAL, NURSING HOME, OR DOMICILIARY CARE AND MEDICAL TREATMENT

* * * * * * *

§ 1720J. Provision of assisted reproductive technology or adoption reimbursements for certain disabled veterans

(a) PROVISION OF SERVICES.—Subject to the availability of appropriations, the Secretary may provide—

(1) fertility counseling and treatment using assisted reproductive technology to a covered veteran or the spouse of a covered veteran; or

(2) adoption reimbursement to a covered veteran.

(b) LIMITATIONS.—Amounts made available for the purposes specified in subsection (a) are subject to the requirements for funds contained in section 508 of division H of the Consolidated Appropriations Act, 2017 (Public Law 115–31).

(c) DEFINITIONS.—In this section:

(1) The term "adoption reimbursement" means reimbursement for the adoption-related expenses for an adoption that is finalized after the date of the enactment of this section under the same terms as apply under the adoption reimbursement program of the Department of Defense, as authorized in Department of Defense Instruction 1341.09, including the reimbursement limits and requirements set forth in such instruction, as in effect on the date of the enactment of this section.

(2) The term "assisted reproductive technology" means benefits relating to reproductive assistance provided to a member of

the Armed Forces who incurs a serious injury or illness on active duty pursuant to section 1074(c)(4)(A) of title 10, as described in the memorandum on the subject of "Policy for Assisted Reproductive Services for the Benefit of Seriously or Severely Ill/Injured (Category II or III) Active Duty Service Members" issued by the Assistant Secretary of Defense for Health Affairs on April 3, 2012, and the guidance issued to implement such policy, as in effect on the date of the enactment of this section, including any limitations on the amount of such benefits available to such a member, except that—

(A) the periods regarding embryo cryopreservation and storage set forth in part III(G) and in part IV(H) of such memorandum shall not apply; and

(B) such term includes embryo cryopreservation and storage without limitation on the duration of such cryopreservation and storage.

(3) The term "covered veteran" means a veteran who has a service-connected disability that results in the inability of the veteran to procreate without the use of fertility treatment.

* * * * * * *

SECTION 252 OF THE MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS ACT, 2018

SEC. 252. [The Secretary may carry out a 2-year pilot program] *During the period preceding October 1, 2022, the Secretary of Veterans Affairs may carry out a 2-year pilot program* making grants to nonprofit veterans services organizations recognized by the Secretary in accordance with section 5902 of title 38, United States Code, to upgrade, through construction and repair, VSO community facilities into health and wellness centers and to promote and expand complementary and integrative wellness programs: Provided, That no single grant may exceed a total of $500,000: Provided further, That the Secretary may not provide more than 20 grants during the 2-year pilot program: Provided further, That the recipient of a grant under this section may not use the grant to purchase real estate or to carry out repair of facilities leased by the recipient or to construct facilities on property leased by the recipient: Provided further, That the Secretary ensures that the grant recipients use grant funds to construct or repair facilities located in at least 10 different geographic locations in economically depressed areas or areas designated as highly rural that are not in close proximity to Department of Veterans Affairs medical centers: Provided further, That the Secretary shall report to the Committees on Appropriations of both Houses of Congress no later than 180 days after enactment of this Act, on the grant program established under this section.

CHANGES IN APPLICATION OF EXISTING LAW

Pursuant to clause 3(f)(1)(A) of rule XIII of the Rules of the House of Representatives, the following statements are submitted describing the effect of provisions in the accompanying bill that directly or indirectly change the application of existing law.

Language is included in various parts of the bill to continue ongoing activities that require annual authorization or additional legislation, which to date have not been enacted.

Language is included in various parts of the bill to place limitations on the use of funds in the bill or change existing limitations and which might, under some circumstances, be construed as changing the application of existing law.

Language is included in various parts of the bill to allow the Secretary of Defense to exceed certain limitations upon notification to the Committee.

Language is included in various parts of the bill to allow funding to be used for official reception and representation expenses.

Language is included in various parts of the bill to enable various appropriations to remain available for more than one year for some programs for which the basic authority legislation does not presently authorize such extended availability.

Language is included in various parts of the bill to permit the transfer of funds to other accounts.

Language is included under Title I to prohibit payments for cost-plus-a-fixed-fee contracts under certain circumstances.

Language is included in various parts of the bill to allow funds to be used for the hire of passenger motor vehicles.

Language is included under Title I to allow advances to the Federal Highway Administration, Department of Transportation under certain circumstances.

Language is included under Title I to prohibit the use of funds to begin construction of new bases without specific appropriations.

Language is included under Title I to prohibit the use of funds for purchase of land or land easements under certain circumstances.

Language is included under Title I to prohibit the use of funds for land acquisition, site preparation, and utility installation for family housing unless funds have been made available in annual appropriations Acts.

Language is included under Title I to prohibit the use of minor construction funds to transfer an activity between installations without prior notification.

Language is included under Title I to prohibit the use of funds for the procurement of steel for any activity if American steel producers have been denied the opportunity to compete for such steel procurements.

Language is included under Title I to prohibit the use of funds to pay real property taxes in any foreign nation.

Language is included under Title I to prohibit the use of funds to initiate a new installation overseas without prior notification.

Language is included under Title I to limit the use of funds for architect and engineer contracts under certain circumstances.

Language is included under Title I to limit the use of funds for awarding contracts to foreign contractors under certain circumstances.

Language is included under Title I to require the Department of Defense to notify the appropriate committees of Congress of any proposed military exercises under certain circumstances.

Language is included under Title I to allow prior year construction funding to be available for currently authorized projects.

Language is included under Title I to allow payment for the cost associated with supervision, inspection, overhead, engineering and design on family housing or military construction projects that are being completed with expired or lapsed funds.

Language is included under Title I to allow funds to be expended on military construction projects for four fiscal years after enactment under certain circumstances.

Language is included under Title I to allow construction funds to be transferred to Housing Improvement Funds.

Language is included under Title I to allow for the transfer of BRAC funds to the Homeowners Assistance Program.

Language is included under Title I to limit funds for the operation and maintenance of family housing to those provided in this appropriation and to limit amounts expended on repairs of general and flag officer quarters under certain circumstances.

Language is included under Title I to allow funds in the Ford Island Improvement Account to be available until expended for certain purposes.

Language is included under Title I to allow for the transfer of expired funding to the Foreign Currency Fluctuation Account under certain circumstances.

Language is included under Title I to allow for transfer of funds among projects and activities in accordance with reprogramming guidelines.

Language is included under Title I to prohibit funds to be used for projects at Arlington Cemetery.

Language is included under Title I providing additional funds for Military Construction, Army.

Language is included under Title I providing additional funds for Military Construction, Navy and Marine Corps.

Language is included under Title I providing additional funds for Military Construction, Air Force.

Language is included under Title I providing additional funds for Military Construction, Army National Guard.

Language is included under Title I providing additional funds for Military Construction, Air National Guard.

Language is included under Title I providing additional funds for Military Construction, Air Force Reserve.

Language is included under Title I defining the congressional defense committees.

Language is included under Title I to require funds appropriated shall be immediately available and allotted to contract for the full scope of authorized projects.

Language is included under Title II providing for the reimbursement to the Department of Defense for the costs of overseas employee mail.

Language is included under Title II to require that the Secretary of Veterans Affairs establish a priority for treatment of veterans who are service-connected disabled, lower income, or have special needs.

Language is included under Title II to require that the Secretary of Veterans Affairs give priority funding of basic medical benefits to priority groups 1 through 6.

Language is included under Title II to allow the Secretary of Veterans Affairs to dispense prescription drugs from VHA facilities to enrolled veterans with privately written prescriptions.

Language is included until Title II requiring the Secretary to ensure sufficient funding is available for the acquisition of prosthetics designed for women Veterans.

Language is included until Title II specifies funding for gender-specific care for women.

Language is included under Title II to require approval of a transfer between development projects in the Information Technology Systems account.

Language is included prohibiting funding in the Veterans Health Record account from being obligated in a manner inconsistent with deployment schedules.

Language is included under Title II establishing time limitations and reporting requirements concerning the obligation of Major Construction funds, limiting the use of funds, allowing the use of funds for program costs, and allowing for the reimbursement to the "General Administration" account for the salaries and expenses of the Office of Construction and Facilities Management employees.

Language is included under Title II to allow Minor Construction funds to be used to repair non-medical facilities damaged by natural disaster or catastrophe.

Language is included under Title II permitting transfers between mandatory and discretionary accounts, limiting and providing for the use of certain funds, funding administrative expenses associated with life insurance programs from excess program revenues, allowing reimbursement from enhanced-use leases and for certain services, requiring notification of construction bid savings, limiting reprogramming amount of major construction projects, restricting changes in the scope of major construction projects, requiring disclosure of insurance and income information, allowing a recovery audit collection program, allowing veterans in the State of Alaska to use Indian Health Service facilities under certain conditions, allowing medical services funds for recreational and funeral expenses, and requiring notification of organizational changes that transfer 25 or more employees from one VA organizational unit to another.

Language is included under Title II requiring the Secretary to maintain certain requirements in operating the toll-free suicide hotline.

Language is included under Title II prohibiting funds from being used to close hospitals, domiciliaries, or clinics, or conduct environmental assessment or diminish services in the Veterans Integrated Service Network 23 as part of a realignment of VA services until the Secretary provides a report that includes a national realignment strategy, a cost benefit analysis, and an inventory of buildings with historic designation.

Language is included under Title II to allow covered veterans and their spouses, under certain conditions, to receive assisted reproductive technology services and adoption reimbursement.

Language is included under Title II pertaining to exceptions for Indian- or Native Hawaiian-owned businesses contracting with the Department.

Language is included in Title II directing the elimination of using Social Security account numbers to identify individuals in all information systems of the Department.

Language is included in Title II pertaining to certification of marriage and family therapists.

Language is included in Title II prohibiting funds from being used to transfer funding from the Filipino Veterans Equity Compensation Fund to any other VA account.

Language is included in Title II permitting funds to carry out and expand the child care program.

Language is included in Title II prohibiting funds to enter into an agreement to resolve a dispute or claim with an individual that would restrict the individual from speaking to Members of Congress or their staff.

Language is included in Title II requiring certain data to be included in budget justifications for major construction projects.

Language is included until Title II providing funding for infrastructure improvements.

Language is included in Title II prohibiting the Inspector General timely access to information.

Language is included in Title II prohibiting funding to be used that would increase wait times for veterans who seek medical care.

Language is included in Title II prohibiting the use of funds in fiscal year 2020 to convert any program that received specific purpose funding in fiscal year 2019 to a general purpose-funded program.

Language is included under Title II prohibiting the use of dogs as part of the conduct of any study.

Language is included under Title II prohibiting the closure of a certain community-based outpatient clinic until the Secretary completes a market area assessment.

Language is included under Title II requiring the Secretary to update the "Planning and Activating Community Based Outpatient Clinics" handbook.

Language is included under Title II extending the duration of the VSO pilot program.

Language is included under Title III United States Court of Appeals for Veterans Claims, Salaries and Expenses, to permit the use of funds for a pro bono program.

Language is included under Title III Cemeterial Expenses, Army, Salaries and Expenses, to permit the use of funds for parking maintenance and repairs.

Language is included under Title III Armed Forces Retirement Home to permit payment from the general fund of the Treasury to the Trust Fund.

Language is included under Title III to allow for the use of concession fees.

Language is included under Title IV providing Overseas Contingency Operations funding with an emergency designation.

Language is included under Title IV providing funds with emergency designation, for Overseas Contingency Operations and European Defense Initiative for the Army.

Language is included under Title IV providing funds with emergency designation, for Overseas Contingency Operations and European Defense Initiative for the Navy and Marine Corps.

Language is included under Title IV providing funds with emergency designation, for Overseas Contingency Operations and European Defense Initiative for the Air Force.

Language is included under Title IV providing funds with emergency designation, for Overseas Contingency Operations and European Defense Initiative for the Defense Agencies.

Language is include under Title V providing Natural Disaster Relief funding with an emergency designation.

Language is included under Title V providing funds with an emergency designation, for hurricane damages sustained by the Navy and Marine Corps.

Language is included under Title V providing funds with an emergency designation, for hurricane damages sustained by the Air Force.

Language is included under Title V providing funds with an emergency designation, for hurricane damages sustained by the Army National Guard.

Language is included under Title V providing funds with an emergency designation, for hurricane damages sustained by the Army Reserve.

Language is included under Title VI to limit the use of funds for Federal entities when they are not in compliance with Federal law relating to risk assessment, the protection of private property rights, or unfunded mandates.

Language is included under Title VI to prohibit the use of funds for a project or program named for a serving Member of the United States Congress.

Language is included under Title VI prohibiting funds from being used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography.

Language is included under Title VI prohibiting funds from being used to pay for first class travel in violation of federal regulations.

Language is included under Title VI prohibiting funds from being used to execute a contract for goods or services where a contractor has not complied with Executive Order 12989.

Language is included under Title VI prohibiting funds from being used by the Department of Defense or the Department of Veterans Affairs for the purchase or lease of a new vehicle except in accordance with Presidential Memorandum Federal Fleet Performance, dated May 24, 2011.

APPROPRIATIONS NOT AUTHORIZED BY LAW

Pursuant to clause 3(f)(1)(B) of rule XIII of the Rules of the House of Representatives, the following table lists the appropriations in the accompanying bill which are not authorized by law for the period concerned:

[dollars in thousands]

Agency/program	Last year of authorization	Authorization level	Appropriations in last year of authorization	Appropriations in this bill
Military Construction, Army	2019	1,170,868	1,001,768	1,132,499
Military Construction, Navy and Marine Corps	2019	2,412,859	2,100,298	2,205,771
Military Construction, Air Force	2019	1,608,773	1,454,723	1,588,730
Military Construction, Defense-Wide	2019	2,506,728	2,465,738	2,025,799
Military Construction, Army National Guard	2019	202,122	180,122	210,819
Military Construction, Air National Guard	2019	191,126	129,126	115,971
Military Construction, Army Reserve	2019	87,919	64,919	60,928
Military Construction, Navy Reserve	2019	43,065	43,065	54,955
Military Construction, Air Force Reserve	2019	122,863	50,163	59,750
North Atlantic Treaty Organization Security Investment Program	2019	171,064	171,064	172,005
Family Housing Construction, Army	2019	330,660	330,660	141,372
Family Housing Operation and Maintenance, Army	2019	376,509	376,509	407,907
Family Housing Construction, Navy and Marine Corps	2019	104,581	104,581	47,661
Family Housing Operation and Maintenance, Navy and Marine Corps	2019	314,536	314,536	377,470
Family Housing Construction, Air Force	2019	78,446	78,446	103,631
Family Housing Operation and Maintenance, Air Force	2019	317,274	317,274	326,216
Family Housing Operation and Maintenance, Defense-Wide	2019	58,373	58,373	57,000
Department of Defense Family Housing Improvement Fund	2019	1,653	1,653	3,045
Department of Defense Military Unaccompanied Housing Improvement Fund	2019	600	600	500
Base Realignment and Closure Account	2019	322,868	322,390	398,526
Dept. of Veterans Affairs, Major Construction	done each yr.		1,127,486	1,235,200
Dept. of Veteran Affairs, Major Leases	done each yr.		45,435	181,158
Armed Forces Retirement Home	2019	64,300	64,300	70,300

PROGRAM DUPLICATION

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, no provision of this bill establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

COMMITTEE HEARINGS

In compliance with Sec. 103(i) of H. Res. 6 (116th Congress) the following hearings were used to develop the fiscal year 2020 Military Construction, Department of Veterans Affairs, and Related Agencies Appropriations Bill:

Date	Title of Hearing	Witnesses
Feb. 7, 2019	Quality of Life in the Military Hearing.	Sergeant Major Daniel A. Dailey, Sergeant Major of the Army; Master Chief Petty Officer Russell Smith, Master Chief Petty Officer of the Navy; Sergeant Major Ronald L. Green, Sergeant Major of the Marine Corps; and Chief Master Sergeant Kaleth O. Wright, Chief Master Sergeant of the Air Force
Feb. 13, 2019	Veterans Long Term Care and Health Challenges Hearing.	Dr. Teresa Boyd, ADUSH for Clinical Operations; and Dr. Scotte R. Hartronft, Acting Executive Director, VA Office of Geriatrics & Extended Care
Feb. 26, 2019	VA General Oversight Hearing.	The Honorable Robert Wilkie, Secretary of Veterans Affairs; and Richard A. Stone, M.D. Executive in Charge, Veterans Health Administration
Feb. 27, 2019	The President's 2019 National Emergency Declaration Circumventing Congress to Build a Border Wall & its Effect on Military Construction and Readiness.	The Honorable Robert H. McMahon, Assistant Secretary of Defense for Sustainment; Mr. Robert G. Salesses, Deputy Assistant Secretary of Defense for Homeland Defense Integration and DSCA; Mr. Alex A. Beehler, Assistant Secretary of the Army Installations, Energy and Environment; The Honorable Phyllis L. Bayer, Assistant Secretary of the Navy Energy, Installations and Environment; and The Honorable John W. Henderson, Assistant Secretary of the Air Force Installations, Environment and Energy
Feb. 28, 2019	Female Veterans Access to VA Hearing.	Dr. Patricia Hayes, Chief Consultant, Women's Health Services; and Dr. Susan McCutcheon, National MH Director, Family Svc/Women's MH/MST
Mar. 6, 2019	Electronic Health Record Modernization and Information Technology Oversight Hearing.	James M. Byrne, General Counsel, Performing the Duties of the Deputy Secretary; James P. Gfrerer, Assistant Secretary for Information and Technology and Chief Information Officer; and John Windom, Executive Director, OEHRM
Mar. 7, 2019	VA Whole Health, Mental Health and Homelessness Hearing.	Dr. Tracy Gaudet, Director, Office of Patient Centered Care (10NE), VHA; Dr. David Carroll, Executive Director, Mental Health Operations; and Dr. Roger Casey, Director, Education-Dissemination, National Center on Homelessness
Mar. 12, 2019	Related Agencies Hearing.	Secretary William M. Matz Jr., American Battle Monuments Commission; Ms. Karen Durham-Aguilera, Executive Director, Department of the Army, Arlington National Cemetery; Stephen T. Rippe, Chief Executive Officer, Armed Forces Retirement Home; and Chief Judge Robert N. Davis, United States Court of Appeals for Veterans Claims
Mar. 13, 2019	Veterans Affairs Office of Inspector General Hearing.	The Honorable Michael J. Missal, Inspector General

Date	Title of Hearing	Witnesses
Mar. 26, 2019	Military Installations and BRAC Budget Hearing.	The Honorable Robert H. McMahon Assistant Secretary of Defense for Sustainment; Lieutenant General Gwen Bingham, Assistant Chief for Installations Management; Vice Admiral Dixon R. Smith, Deputy Chief of Naval Operations, Fleet Readiness and Logistics; Major General Vincent A. Coglianese, Marine Corps Installations Command/Assistant Deputy Commandant, Installations & Logistics (Facilities); and Brigadier General John J. Allen, Air Force Director of Civil Engineers, Deputy Chief of Staff for Logistics, Engineering & Force Protection
Mar. 27, 2019	Veterans Affairs FY 2020 Budget Hearing.	The Honorable Robert Wilkie Secretary of Veterans Affairs; Dr. Paul R. Lawrence, Under Secretary for Benefits; Richard A. Stone, M.D. Executive in Charge, Veterans Health Administration; and Jon Rychalski, Assistant Secretary for Management and Chief Financial Officer
Apr. 2, 2019	Members Day Hearing	The Honorable Anthony Brindisi; The Honorable Salud O. Carbajal; The Honorable Gilbert Ray Cisneros; The Honorable Neal P. Dunn, The Honorable Daniel T. Kildee; The Honorable Gregorio Kilili Camacho Sablan; and The Honorable Glenn Thompson
Apr. 2, 2019	Public Witness Hearing	Ms. Heather L. Ansley, Associate Executive Director of Government Affairs, Paralyzed Veterans of America, Washington, D.C.; Ms. Joy J. Ilem, National Legislative Director, Disabled Veterans of America, Washington, D.C.; and Mr. Patrick D. Murray, National Legislative Service, Veterans of Foreign Wars, Washington, D.C.

FULL COMMITTEE VOTES

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

Roll Call 1

Date: May 9, 2019
Measure: Military Construction, Veterans Affairs and Related Agencies Appropriations Bill, FY 2020
Motion by: Mr. Harris
Description of Motion: To strike section 612
Results: Defeated 22 yeas to 31 nays

Members Voting Yea
Mr. Aderholt
Mr. Amodei
Mr. Calvert
Mr. Carter
Mr. Cole
Mr. Diaz-Balart
Mr. Fleischmann
Mr. Fortenberry
Ms. Granger
Mr. Graves
Dr. Harris
Ms. Herrera Beutler
Mr. Joyce
Mr. Moolenaar
Mr. Newhouse
Mr. Palazzo
Mrs. Roby
Mr. Rogers
Mr. Rutherford
Mr. Simpson
Mr. Stewart
Mr. Womack

Members Voting Nay
Mr. Aguilar
Mr. Bishop
Mrs. Bustos
Mr. Cartwright
Mr. Case
Ms. Clark
Mr. Crist
Mr. Cuellar
Ms. DeLauro
Ms. Frankel
Mr. Hurd
Ms. Kaptur
Mr. Kilmer
Mrs. Kirkpatrick
Mrs. Lawrence
Ms. Lee
Mrs. Lowey
Ms. McCollum
Ms. Meng
Ms. Pingree
Mr. Pocan
Mr. Price
Mr. Quigley
Ms. Roybal-Allard
Mr. Ruppersberger
Mr. Ryan
Mr. Serrano
Mrs. Torres
Mr. Visclosky
Ms. Wasserman Schultz
Mrs. Watson Coleman

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

Roll Call 2

Date: May 9, 2019
Measure: Military Construction, Veterans Affairs and Related Agencies Appropriations Bill, FY 2020
Motion by: Mr. Carter
Description of Motion: To provide $7.2 billion and immediately transfer the funds to the Department of Homeland Security
Results: Defeated 21 yeas to 31 nays

Members Voting Yea
Mr. Aderholt
Mr. Calvert
Mr. Carter
Mr. Cole
Mr. Diaz-Balart
Mr. Fleischmann
Mr. Fortenberry
Ms. Granger
Mr. Graves
Dr. Harris
Ms. Herrera Beutler
Mr. Joyce
Mr. Moolenaar
Mr. Newhouse
Mr. Palazzo
Mrs. Roby
Mr. Rogers
Mr. Rutherford
Mr. Simpson
Mr. Stewart
Mr. Womack

Members Voting Nay
Mr. Aguilar
Mr. Bishop
Mrs. Bustos
Mr. Cartwright
Mr. Case
Ms. Clark
Mr. Crist
Mr. Cuellar
Ms. DeLauro
Ms. Frankel
Mr. Hurd
Ms. Kaptur
Mr. Kilmer
Mrs. Kirkpatrick
Mrs. Lawrence
Ms. Lee
Mrs. Lowey
Ms. McCollum
Ms. Meng
Ms. Pingree
Mr. Pocan
Mr. Price
Mr. Quigley
Ms. Roybal-Allard
Mr. Ruppersberger
Mr. Ryan
Mr. Serrano
Mrs. Torres
Mr. Visclosky
Ms. Wasserman Schultz
Mrs. Watson Coleman

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

Roll Call 3

Date: May 9, 2019
Measure: Military Construction, Veterans Affairs and Related Agencies Appropriations Bill, FY 2020
Motion by: Mr. Hurd
Description of Motion: Regarding detainees at Guantanamo Bay, Cuba and provides $88.5 million for a new detention center.
Results: Defeated 21 yeas to 30 nays

Members Voting Yea
Mr. Aderholt
Mr. Calvert
Mr. Carter
Mr. Cole
Mr. Diaz-Balart
Mr. Fleischmann
Mr. Fortenberry
Ms. Granger
Mr. Graves
Dr. Harris
Ms. Herrera Beutler
Mr. Hurd
Mr. Joyce
Mr. Moolenaar
Mr. Newhouse
Mr. Palazzo
Mrs. Roby
Mr. Rogers
Mr. Rutherford
Mr. Simpson
Mr. Stewart

Members Voting Nay
Mr. Aguilar
Mr. Bishop
Mrs. Bustos
Mr. Cartwright
Mr. Case
Ms. Clark
Mr. Crist
Mr. Cuellar
Ms. DeLauro
Ms. Frankel
Ms. Kaptur
Mr. Kilmer
Mrs. Kirkpatrick
Mrs. Lawrence
Ms. Lee
Mrs. Lowey
Ms. McCollum
Ms. Meng
Ms. Pingree
Mr. Pocan
Mr. Price
Mr. Quigley
Ms. Roybal-Allard
Mr. Ruppersberger
Mr. Ryan
Mr. Serrano
Mrs. Torres
Mr. Visclosky
Ms. Wasserman Schultz
Mrs. Watson Coleman

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

Roll Call 4

Date: May 9, 2019
Measure: Military Construction, Veterans Affairs and Related Agencies Appropriations Bill, FY 2020
Motion by: Mr. Graves
Description of Motion: International Commerce, Investment, and Sanctions.
Results: Defeated 22 yeas to 30 nays

Members Voting Yea
Mr. Aderholt
Mr. Calvert
Mr. Carter
Mr. Cole
Mr. Diaz-Balart
Mr. Fleischmann
Mr. Fortenberry
Ms. Granger
Mr. Graves
Dr. Harris
Ms. Herrera Beutler
Mr. Hurd
Mr. Joyce
Mr. Moolenaar
Mr. Newhouse
Mr. Palazzo
Mrs. Roby
Mr. Rogers
Mr. Rutherford
Mr. Simpson
Mr. Stewart
Mr. Womack

Members Voting Nay
Mr. Aguilar
Mr. Bishop
Mrs. Bustos
Mr. Cartwright
Mr. Case
Ms. Clark
Mr. Crist
Mr. Cuellar
Ms. DeLauro
Ms. Frankel
Ms. Kaptur
Mr. Kilmer
Mrs. Kirkpatrick
Mrs. Lawrence
Ms. Lee
Mrs. Lowey
Ms. McCollum
Ms. Meng
Ms. Pingree
Mr. Pocan
Mr. Price
Mr. Quigley
Ms. Roybal-Allard
Mr. Ruppersberger
Mr. Ryan
Mr. Serrano
Mrs. Torres
Mr. Visclosky
Ms. Wasserman Schultz
Mrs. Watson Coleman

FULL COMMITTEE VOTES

Pursuant to the provisions of clause 3(b) of rule XIII of the House of Representatives, the results of each roll call vote on an amendment or on the motion to report, together with the names of those voting for and those voting against, are printed below:

Roll Call 5

Date: May 9, 2019
Measure: Military Construction, Veterans Affairs and Related Agencies Appropriations Bill, FY 2020
Motion by: Ms. Kaptur
Description of Motion: Report the bill to the House, as amended.
Results: Defeated 31 yeas to 21 nays

Members Voting Yea
Mr. Aguilar
Mr. Bishop
Mrs. Bustos
Mr. Cartwright
Mr. Case
Ms. Clark
Mr. Crist
Mr. Cuellar
Ms. DeLauro
Ms. Frankel
Mr. Hurd
Ms. Kaptur
Mr. Kilmer
Mrs. Kirkpatrick
Mrs. Lawrence
Ms. Lee
Mrs. Lowey
Ms. McCollum
Ms. Meng
Ms. Pingree
Mr. Pocan
Mr. Price
Mr. Quigley
Ms. Roybal-Allard
Mr. Ruppersberger
Mr. Ryan
Mr. Serrano
Mrs. Torres
Mr. Visclosky
Ms. Wasserman Schultz
Mrs. Watson Coleman

Members Voting Nay
Mr. Aderholt
Mr. Calvert
Mr. Carter
Mr. Cole
Mr. Diaz-Balart
Mr. Fleischmann
Mr. Fortenberry
Ms. Granger
Mr. Graves
Dr. Harris
Ms. Herrera Beutler
Mr. Joyce
Mr. Moolenaar
Mr. Newhouse
Mr. Palazzo
Mrs. Roby
Mr. Rogers
Mr. Rutherford
Mr. Simpson
Mr. Stewart
Mr. Womack

BUDGETARY IMPACT OF THE FY 2020 MILITARY CONSTRUCTION, VETERANS AFFAIRS, AND RELATED AGENCIES APPROPRIATIONS BILL PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(A), PUBLIC LAW 93–344, AS AMENDED

[IN MILLIONS OF DOLLARS]

COMPARISION WITH BUDGET RESOLUTION

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and Section 308(a)(1)(A) of the Congressional Budget Act requires the report accompanying a bill providing new budget authority to contain a statement comparing the levels in the bill to the suballocations submitted under section 302(b) of the Act for the most recently agreed to concurrent resolution on the budget for the applicable fiscal year.

[In millions of dollars]

	302(b) Allocation		This Bill	
	Budget Authority	Outlays	Budget Authority	Outlays
Comparison of amounts in the bill with Committee allocations to its subcommittees: Subcommittee on Military Construction, Veterans Affairs, and Related Agencies				
General Purpose Discretionary	105,217	99,500	106,138 [1]	99,219
Mandatory	114,950	114,775	114,950 [1]	114,775

[1] Includes outlays from prior-year budget authority.

NOTE—Consistent with the funding recommended in the bill for overseas contingency operations/global war on terrorism, in accordance with section 251(b)(2) of the Balanced Budget and Emergency Deficit Control Act of 1985, and after the bill is reported to the House, the Chairman of the Committee on the Budget will provide a revised section 302(a) allocation reflecting an additional $921,000,000 in discretionary budget authority and $7,000,000 in associated outlays. That new allocation will eliminate the technical difference prior to Floor consideration.

In addition, the amounts in this report do not include $2,300,000,000 in discretionary budget authority and $23,000,000 in associated outlays from funding designated as being for emergency requirements pursuant to section 251 of the Balanced Budget and Emergency Deficit Control Act of 1985. Consistent with the Congressional Budget Act of 1974, in the House of Representatives such funding does not count against the Committee's allocation.

FIVE-YEAR PROJECTION OF OUTLAYS

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and in compliance with section 308(a)(1)(B) of the Congressional Budget and Impoundment Control Act of 1974 (Public Law 93–344), as amended, the following table contains five-year projections

[In millions of dollars]

Projection of outlays associated with the recommendation:				
2020			[1]	128,782
2021				7,442
2022				5,680
2023				3,322
2024 and future years				3,298

[1] Excludes outlays from prior-year budget authority.

FINANCIAL ASSISTANCE TO STATE AND LOCAL GOVERNMENTS

Pursuant to clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and in accordance with section 308(a)(1)(C) of the Congressional Budget Act of 1974, as amended, the Congressional Budget Office has provided the following estimates of new budget authority and

[In millions of dollars]

	Budget Authority	Outlays
Financial assistance to State and local governments for 2020	260 [1]	47

[1] Excludes outlays from prior-year budget authority.

COMPARATIVE STATEMENT OF NEW BUDGET AUTHORITY AND STATE LIST

The following is a complete listing, by title, State and country, of the Committee's recommendations for military construction and family housing projects, including Overseas Contingency Operations projects:

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE I - DEPARTMENT OF DEFENSE					
Military Construction, Army	1,021,768	1,453,499	1,132,499	+110,731	-321,000
Military Construction, Navy and Marine Corps	2,118,619	2,805,743	2,205,771	+87,152	-599,972
Military Construction, Air Force	1,440,323	2,179,230	1,588,730	+148,407	-590,500
Military Construction, Defense-Wide	2,550,728	2,504,190	2,025,799	-524,929	-478,391
Total, Active components	7,131,438	8,942,662	6,952,799	-178,639	-1,989,863
Military Construction, Army National Guard	190,122	210,819	210,819	+20,697	---
Military Construction, Air National Guard	129,126	165,971	115,971	-13,155	-50,000
Military Construction, Army Reserve	64,919	60,928	60,928	-3,991	---
Military Construction, Navy Reserve	43,065	54,955	54,955	+11,890	---
Military Construction, Air Force Reserve	38,063	59,750	59,750	+21,687	---
Total, Reserve components	465,295	552,423	502,423	+37,128	-50,000
North Atlantic Treaty Organization Security Investment Program	171,064	144,040	172,005	+941	+27,965
Department of Defense Base Closure Account	342,000	278,526	398,526	+56,526	+120,000
Total, Military Construction	8,109,797	9,917,651	8,025,753	-84,044	-1,891,898
Family Housing Construction, Army	330,660	141,372	141,372	-189,288	---
Family Housing Operation and Maintenance, Army	376,509	357,907	407,907	+31,398	+50,000
Family Housing Construction, Navy and Marine Corps	104,581	47,661	47,661	-56,920	---
Family Housing Operation and Maintenance, Navy and Marine Corps	314,536	317,870	377,470	+62,934	+59,600
Family Housing Construction, Air Force	78,446	103,631	103,631	+25,185	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Family Housing Operation and Maintenance, Air Force...	317,274	295,016	326,216	+8,942	+31,200
Family Housing Operation and Maintenance, Defense-Wide	58,373	57,000	57,000	-1,373	---
Department of Defense Family Housing Improvement Fund.	1,653	3,045	3,045	+1,392	---
DoD Military Unaccompanied Housing Improvement Fund...	600	500	500	-100	---
Total, Family Housing.....	1,582,632	1,324,002	1,464,802	-117,830	+140,800
Administrative Provisions					
Military Construction, Air Force (Sec. 126) (rescission).....	-31,158	---	---	+31,158	---
Military Construction, Defense-Wide (Sec. 125) (rescission).....	---	---	-45,055	-45,055	-45,055
Military Construction, Army (Sec. 124).....	94,100	---	79,500	-14,600	+79,500
Military Construction, Navy and Marine Corps (Sec. 124).....	196,850	---	546,800	+349,950	+546,800
Military Construction, Army National Guard (Sec. 124).	22,000	---	155,000	+133,000	+155,000
Military Construction, Air National Guard (Sec. 124)..	54,000	---	57,000	+3,000	+57,000
Military Construction, Army Reserve (Sec. 125).....	23,000	---	---	-23,000	---
NATO Security Investment Program (Sec. 126) (rescission).....	-25,000	---	---	+25,000	---
42 USC 3374 (Sec. 126).....	-15,333	---	---	+15,333	---
Military Construction, Air Force (Sec. 124).....	118,450	---	230,400	+111,950	+230,400
Military Construction, Air Force Reserve (Sec. 124)...	84,800	---	24,800	-60,000	+24,800
Family Housing Construction, Navy and Marine Corps (Sec. 126).....	-2,138	---	---	+2,138	---
Defense Access Roads Program (Sec. 130).....	30,000	---	---	-30,000	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Military Construction - Enhancing Force Protection and Safety on Military Installations (Sec. 132).....	100,000	---	---	-100,000	---
Military Construction, Army National Guard.....	-10,000	---	---	+10,000	---
Total, Administrative Provisions.....	639,571	---	1,048,445	+408,874	+1,048,445
Total, title I, Department of Defense.....	10,332,000	11,241,653	10,539,000	+207,000	-702,653
Appropriations.....	(10,415,629)	(11,241,653)	(10,584,055)	(+168,426)	(-657,598)
Rescissions.....	(-83,629)	---	(-45,055)	(+38,574)	(-45,055)
TITLE II - DEPARTMENT OF VETERANS AFFAIRS					
Veterans Benefits Administration					
Compensation and pensions:					
Advance from prior year appropriations.....	95,768,462	109,017,152	109,017,152	+13,248,690	---
Budget year request	2,994,366	---	---	-2,994,366	---
Subtotal (available this fiscal year).....	98,762,828	109,017,152	109,017,152	+10,254,324	---
Advance appropriations.....	109,017,152	116,801,316	116,801,316	+7,784,164	---
Readjustment benefits:					
Advance from prior year appropriations.....	11,832,175	14,065,282	14,065,282	+2,233,107	---
Budget year request	---	---	---	---	---
Subtotal (available this fiscal year).....	11,832,175	14,065,282	14,065,282	+2,233,107	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Advance appropriations	14,065,282	12,578,965	12,578,965	-1,486,317	---
Veterans insurance and indemnities:					
Advance from prior year appropriations	109,090	111,340	111,340	+2,250	---
Budget year request	---	17,620	17,620	+17,620	---
Subtotal (available this fiscal year)	109,090	128,960	128,960	+19,870	---
Advance appropriations	111,340	129,224	129,224	+17,884	---
Veterans housing benefit program fund:					
(Limitation on direct loans)	(500)	(500)	(500)	---	---
Administrative expenses	200,612	200,377	200,377	-235	---
Vocational rehabilitation loans program account	39	58	58	+19	---
(Limitation on direct loans)	(2,037)	(2,008)	(2,008)	(-29)	---
Administrative expenses	396	402	402	+6	---
Native American veteran housing loan program account	1,163	1,163	1,186	+23	+23
General operating expenses, VBA	2,956,316	3,000,000	3,025,000	+68,684	+25,000
Total, Veterans Benefits Administration	129,346,666	132,729,125	132,754,148	+3,407,482	+25,023
Appropriations	(6,152,892)	(3,219,620)	(3,244,643)	(-2,908,249)	(+25,023)
Advance appropriations	(123,193,774)	(129,509,505)	(129,509,505)	(+6,315,731)	---
Advances from prior year appropriations	(107,709,727)	(123,193,774)	(123,193,774)	(+15,484,047)	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Veterans Health Administration					
Medical services:					
Advance from prior year appropriations.....	49,161,165	51,411,165	51,411,165	+2,250,000	---
VHA Medical Services.....	750,000	---	169,160	-580,840	+169,160
Subtotal, available this fiscal year.....	49,911,165	51,411,165	51,580,325	+1,669,160	+169,160
Advance appropriations.....	51,411,165	56,158,015	56,158,015	+4,746,850	---
Medical community care:					
Advance from prior year appropriations.....	8,384,704	10,758,399	10,758,399	+2,373,695	---
Budget year request	1,000,000	4,521,400	4,521,400	+3,521,400	---
Subtotal, available this fiscal year.....	9,384,704	15,279,799	15,279,799	+5,895,095	---
Advance appropriations.....	10,758,399	17,131,179	17,131,179	+6,372,780	---
Medical support and compliance:					
Advance from prior year appropriations.....	7,239,156	7,239,156	7,239,156	---	---
Budget year request	---	98,800	98,800	+98,800	---
Subtotal, available this fiscal year.....	7,239,156	7,337,956	7,337,956	+98,800	---
Advance appropriations.....	7,239,156	7,914,191	7,914,191	+675,035	---

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Medical facilities:					
Advance from prior year appropriations	5,914,288	6,141,880	6,141,880	+227,592	---
Budget year request	90,180	---	20,000	-70,180	+20,000
Subtotal, available this fiscal year	6,004,468	6,141,880	6,161,880	+157,412	+20,000
Advance appropriations	6,141,880	6,433,265	6,433,265	+291,385	---
Medical and prosthetic research	779,000	762,000	840,000	+61,000	+78,000
Medical care cost recovery collections:					
Offsetting collections	-3,590,000	-3,729,000	-3,729,000	-139,000	---
Appropriations (indefinite)	3,590,000	3,729,000	3,729,000	+139,000	---
Subtotal	---	---	---	---	---
DoD-VA Joint Medical Funds (transfer out) (Sec. 219)	(-301,578)	(-314,409)	(-314,409)	(-12,831)	---
DoD-VA Joint Medical Funds (by transfer) (Sec. 219)	(301,578)	(314,409)	(314,409)	(+12,831)	---
MCCF to Medical Community Care (transfer out) (Sec. 214)	---	(-446,000)	(-446,000)	(-446,000)	---
MCCF to Medical Community Care (by transfer) (Sec. 214)	---	(446,000)	(446,000)	(+446,000)	---
DoD-VA Health Care Sharing Incentive Funds (transfer out) (Sec. 222)	(-15,000)	(-15,000)	(-15,000)	---	---
DoD-VA Health Care Sharing Incentive Fund (by transfer) (Sec. 222)	(15,000)	(15,000)	(15,000)	---	---
Total, Veterans Health Administration	78,169,780	93,018,850	93,286,010	+15,116,230	+267,160
Appropriations	(2,619,180)	(5,382,200)	(5,649,360)	(+3,030,180)	(+267,160)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Advance appropriations	(75,550,600)	(87,636,650)	(87,636,650)	(+12,086,050)	---
(By transfer)	(316,578)	(775,409)	(775,409)	(+458,831)	---
(Transfer out)	(-316,578)	(-775,409)	(-775,409)	(-458,831)	---
Advances from prior year appropriations	(70,699,313)	(75,550,600)	(75,550,600)	(+4,851,287)	---
National Cemetery Administration					
National Cemetery Administration	315,836	329,000	329,000	+13,164	---
Departmental Administration					
General administration	355,897	369,200	369,200	+13,303	---
Board of Veterans Appeals	174,748	182,000	182,000	+7,252	---
Information technology systems	4,103,000	4,343,000	4,343,000	+240,000	---
Veterans Electronic Health Record	1,107,000	1,603,000	1,603,000	+496,000	---
Office of Inspector General	192,000	207,000	222,000	+30,000	+15,000
Construction, major projects	1,127,486	1,235,200	1,235,200	+107,714	---
Construction, minor projects	649,514	398,800	421,117	-228,397	+22,317
Grants for construction of State extended care facilities	150,000	90,000	150,000	---	+60,000
Grants for the construction of veterans cemeteries	45,000	45,000	45,000	---	---
Total, Departmental Administration	7,904,645	8,473,200	8,570,517	+665,872	+97,317
Administrative Provisions					
Medical Support and Compliance (rescission) (Sec. 236)	-211,000	---	---	+211,000	---
Infrastructure Initiative (Sec. 243)	2,000,000	---	1,000,000	-1,000,000	+1,000,000
EHRM (rescission) (Sec. 250)	---	---	-70,000	-70,000	-70,000
Total, Administrative Provisions	1,789,000	---	930,000	-859,000	+930,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
Total, title II, Department of Veterans Affairs.	217,525,927	234,550,175	235,869,675	+18,343,748	+1,319,500
Appropriations	(18,992,553)	(17,404,020)	(18,793,520)	(-199,033)	(+1,389,500)
Rescissions	(-211,000)	---	(-70,000)	(+141,000)	(-70,000)
Advance Appropriations					
Mandatory	(123,193,774)	(129,509,505)	(129,509,505)	(+6,315,731)	---
Discretionary	(75,550,600)	(87,636,650)	(87,636,650)	(+12,086,050)	---
(By transfer)	(316,578)	(775,409)	(775,409)	(+458,831)	---
(Transfer out)	(-316,578)	(-775,409)	(-775,409)	(-458,831)	---
(Limitation on direct loans)	(2,537)	(2,508)	(2,508)	(-29)	---
Advances from prior year appropriations:					
Mandatory	(107,709,727)	(123,193,774)	(123,193,774)	(+15,484,047)	---
Discretionary	(70,699,313)	(75,550,600)	(75,550,600)	(+4,851,287)	---
Discretionary	91,337,787	105,023,050	106,342,550	+15,004,763	+1,319,500
Advances from prior year less FY 2021 advances	-4,851,287	-12,086,050	-12,086,050	-7,234,763	---
Net discretionary	86,486,500	92,937,000	94,256,500	+7,770,000	+1,319,500
Mandatory	126,188,140	129,527,125	129,527,125	+3,338,985	---
Advances from prior year less FY 2021 advances	-15,484,047	-6,315,731	-6,315,731	+9,168,316	---
Net mandatory	110,704,093	123,211,394	123,211,394	+12,507,301	---
Total, mandatory and discretionary	197,190,593	216,148,394	217,467,894	+20,277,301	+1,319,500

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE III - RELATED AGENCIES					
American Battle Monuments Commission					
Salaries and expenses	104,000	75,100	104,000	---	+28,900
U.S. Court of Appeals for Veterans Claims					
Salaries and expenses	34,955	35,400	35,400	+445	---
Department of Defense - Civil					
Cemeterial Expenses, Army					
Salaries and expenses	80,800	70,800	80,800	---	+10,000
Construction	33,600	---	131,000	+97,400	+131,000
Total, Cemeterial Expenses, Army	114,400	70,800	211,800	+97,400	+141,000
Armed Forces Retirement Home - Trust Fund					
Operation and maintenance	41,300	41,300	43,300	+2,000	+2,000
Capital program	1,000	1,000	5,000	+4,000	+4,000
Payment from General Fund	22,000	22,000	22,000	---	---
Total, Armed Forces Retirement Home	64,300	64,300	70,300	+6,000	+6,000
Total, title III, Related Agencies	317,655	245,600	421,500	+103,845	+175,900

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE IV - OVERSEAS CONTINGENCY OPERATIONS					
Overseas Contingency Operations					
Military Construction, Army	---	122,300	33,800	+33,800	-88,500
Military Construction, Defense-Wide	60,000	---	---	-60,000	---
Subtotal, Overseas Contingency Operations	60,000	122,300	33,800	-26,200	-88,500
European Deterrence / Reassurance Initiative					
Military Construction, Army	192,250	66,918	123,060	-69,190	+56,142
Military Construction, Navy and Marine Corps	227,320	94,570	281,576	+54,256	+187,006
Military Construction, Air Force	414,800	314,738	436,564	+21,764	+121,826
Military Construction, Defense-Wide	27,050	46,000	46,000	+18,950	---
Subtotal, European Deterrence / Reassurance Initiative	861,420	522,226	887,200	+25,780	+364,974
Total, Overseas Contingency Operations	921,420	644,526	921,000	-420	+276,474
Administrative Provisions					
Military Construction, Army (including transfer authority) (Sec. 401) (emergency)	---	9,200,000	---	---	-9,200,000
Total, title IV, Overseas Contingency Operations (and emergencies)	921,420	9,844,526	921,000	-420	-8,923,526

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR 2019
AND BUDGET REQUESTS AND AMOUNTS RECOMMENDED IN THE BILL FOR 2020
(Amounts in thousands)

	FY 2019 Enacted	FY 2020 Request	Bill	Bill vs. Enacted	Bill vs. Request
TITLE V - NATURAL DISASTER RELIEF					
Military Construction, Navy and Marines Corps (emergency)	---	---	1,210,948	+1,210,948	+1,210,948
Military Construction, Air Force (emergency)	---	---	1,035,752	+1,035,752	+1,035,752
Military Construction, Army National Guard (emergency)	---	---	50,000	+50,000	+50,000
Military Construction, Army Reserve (emergency)	---	---	3,300	+3,300	+3,300
Total, title V, Natural Disaster Relief (emergencies)	---	---	2,300,000	+2,300,000	+2,300,000
Grand total	229,097,002	255,881,954	250,051,175	+20,954,173	-5,830,779
Appropriations	(29,725,837)	(28,891,273)	(29,799,075)	(+73,238)	(+907,802)
Emergency appropriations	---	(9,200,000)	---	---	(-9,200,000)
Rescissions	(-294,629)	---	(-115,055)	(+179,574)	(-115,055)
Advance appropriations	(198,744,374)	(217,146,155)	(217,146,155)	(+18,401,781)	---
Overseas contingency operations	(921,420)	(644,526)	(921,000)	(-420)	(+276,474)
Advances from prior year appropriations	(178,409,040)	(198,744,374)	(198,744,374)	(+20,335,334)	---
(By transfer)	(316,578)	(775,409)	(775,409)	(+458,831)	---
(Transfer out)	(-316,578)	(-775,409)	(-775,409)	(-458,831)	---
(Limitation on direct loans)	(2,537)	(2,508)	(2,508)	(-29)	---

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
ALABAMA		
ARMY		
REDSTONE ARSENAL		
AIRCRAFT AND FLIGHT EQUIPMENT BUILDING	38,000	38,000
ARMY NATIONAL GUARD		
FOLEY		
NATIONAL GUARD READINESS CENTER	12,000	12,000
TOTAL, ALABAMA	50,000	50,000
ALASKA		
AIR FORCE		
EIELSON AFB		
F-35 AME STORAGE FACILITY	8,600	8,600
TOTAL, ALASKA	8,600	8,600
ARIZONA		
NAVY		
YUMA		
HANGAR 95 RENOVATION AND ADDITION	90,160	90,160
TOTAL, ARIZONA	90,160	90,160
ARKANSAS		
AIR FORCE		
LITTLE ROCK AFB		
C-130H/J FUSELAGE TRAINER FACILITY	47,000	47,000
TOTAL, ARKANSAS	47,000	47,000
CALIFORNIA		
NAVY		
CAMP PENDLETON		
I MEF CONSOLIDATED INFORMATION CENTER	113,869	63,869
62 AREA MESS HALL AND CONSOLIDATED WAREHOUSE	71,700	71,700
CHINA LAKE		
RUNWAY AND TAXIWAY EXTENSION	64,500	64,500
CORONADO		
NAVY V-22 HANGAR	86,830	86,830
SAN DIEGO		
PIER 8 REPLACEMENT (INC 2)	59,353	59,353
SEAL BEACH		
AMMUNITION PIER	95,310	60,310
TRAVIS AFB		
ALERT FORCE COMPLEX	64,000	64,000
AIR FORCE		
TRAVIS AFB		
KC-46A ALTER B181/B185/B187 SQUAD OPS/AMU	6,600	6,600
KC-46A REGIONAL MAINTENANCE TRAINING FACILITY	19,500	19,500
DEFENSE-WIDE		
BEALE AFB		
HYDRANT FUEL SYSTEM REPLACEMENT	33,700	33,700
CAMP PENDLETON		
AMBULATORY CARE CENTER/DENTAL CLINIC REPLACEMENT	17,700	17,700
ARMY NATIONAL GUARD		
CAMP ROBERTS		
AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	12,000	12,000
TOTAL, CALIFORNIA	645,062	560,062

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
COLORADO		
ARMY		
FORT CARSON		
COMPANY OPERATIONS FACILITY	71,000	71,000
AIR FORCE		
SCHRIEVER AFB		
CONSOLIDATED SPACE OPERATIONS FACILITY	148,000	74,000
TOTAL, COLORADO	219,000	145,000
CONNECTICUT		
NAVY		
NEW LONDON		
SSN BERTHING PIER 32	72,260	72,260
TOTAL, CONNECTICUT	72,260	72,260
DELAWARE		
ARMY RESERVE		
DOVER AFB		
ARMY RESERVE CENTER/BMA	21,000	21,000
TOTAL, DELAWARE	21,000	21,000
DISTRICT OF COLUMBIA		
NAVY		
NAVAL OBSERVATORY		
MASTER TIME CLOCKS AND OPERATIONS FACILITY (INC 2)	75,600	---
TOTAL, DISTRICT OF COLUMBIA	75,600	---
FLORIDA		
NAVY		
JACKSONVILLE		
TARGETING & SURVEILLANCE SYSTEMS SUPPLY FACILITY	32,420	32,420
DEFENSE-WIDE		
EGLIN AFB		
SOF COMBINED SQUADRON OPS FACILITY	16,500	16,500
HURLBURT FIELD		
SOF MAINTENANCE TRAINING FACILITY	18,950	18,950
SOF AMU AND WEAPONS HANGAR	72,923	72,923
SOF COMBINED SQUADRON OPERATIONS FACILITY	16,513	16,513
KEY WEST		
SOF WATERCRAFT MAINTENANCE FACILITY	16,000	16,000
TOTAL, FLORIDA	173,306	173,306
GEORGIA		
ARMY		
FORT GORDON		
CYBER INSTRUCTIONAL FACILITY (ADMIN/COMMAND)	107,000	70,000
HUNTER ARMY AIRFIELD		
AIRCRAFT MAINTENANCE HANGAR	62,000	62,000
AIR NATIONAL GUARD		
SAVANNAH/HILTON HEAD IAP		
CONSOLIDATED JOINT AIR DOMINANCE HANGAR/SHOPS	24,000	24,000
AIR FORCE RESERVE		
ROBINS AFB		
CONSOLIDATED MISSSION COMPLEX, PHASE 3	43,000	43,000
TOTAL, GEORGIA	236,000	199,000

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
HAWAII		
ARMY		
FORT SHAFTER		
COMMAND AND CONTROL FACILITY (INCR 5)	60,000	60,000
NAVY		
KANEOHE BAY		
BACHELOR ENLISTED QUARTERS	134,050	134,050
WEST LOCH		
MAGAZINE CONSOLIDATION, PHASE 1	53,790	53,790
DEFENSE-WIDE		
JOINT BASE PEARL HARBOR-HICKAM		
SOF UNDERSEA OPERATIONAL TRAINING FACILITY	67,700	67,700
TOTAL, HAWAII	315,540	315,540
IDAHO		
ARMY NATIONAL GUARD		
ORCHARD TRAINING AREA		
RAILROAD TRACKS	29,000	29,000
TOTAL, IDAHO	29,000	29,000
ILLINOIS		
AIR FORCE		
SCOTT AFB		
JOINT OPERATIONS AND MISSION PLANNING CENTER	100,000	100,000
TOTAL, ILLINOIS	100,000	100,000
KENTUCKY		
ARMY		
FORT CAMPBELL		
GENERAL PURPOSE MAINTENANCE SHOP	51,000	51,000
AUTOMATED INFANTRY PLATOON BATTLE COURSE	7,100	7,100
EASEMENTS	3,200	3,200
TOTAL, KENTUCKY	61,300	61,300
LOUISIANA		
NAVY RESERVE		
NEW ORLEANS		
ENTRY CONTROL FACILITY UPGRADES	25,260	25,260
TOTAL, LOUISIANA	25,260	25,260
MARYLAND		
AIR FORCE		
JOINT BASE ANDREWS		
PRESIDENTIAL AIRCRAFT RECAP COMPLEX, (INC 3)	86,000	86,000
DEFENSE-WIDE		
BETHESDA NAVAL HOSPITAL		
MEDCEN ADDITION/ALTERTION (INCR 3)	96,900	33,000
FORT DETRICK		
MEDICAL RESEARCH ACQUISITION BUILDING	27,846	27,846
FORT MEADE		
NSAW RECAPITALIZE BUILDING #3 (INC 2)	426,000	426,000
ARMY NATIONAL GUARD		
HAVRE DE GRACE		
COMBINED SUPPORT MAINTENANCE SHOP	12,000	12,000
TOTAL, MARYLAND	648,746	584,846

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
MASSACHUSETTS		
ARMY		
SOLDIER SYSTEMS CENTER NATICK		
HUMAN ENGINEERING LAB	50,000	50,000
AIR FORCE		
HANSCOM AFB		
MIT-LINCOLN LABORATORY (WEST LAB CSL/MIF) (INC 2)	135,000	100,000
ARMY NATIONAL GUARD		
CAMP EDWARDS		
AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	9,700	9,700
TOTAL, MASSACHUSETTS	194,700	159,700
MICHIGAN		
ARMY		
DETROIT ARSENAL		
SUBSTATION	24,000	24,000
TOTAL, MICHIGAN	24,000	24,000
MINNESOTA		
ARMY NATIONAL GUARD		
NEW ULM		
NATIONAL GUARD VEHICLE MAINTENANCE SHOP	11,200	11,200
TOTAL, MINNESOTA	11,200	11,200
MISSISSIPPI		
DEFENSE-WIDE		
COLUMBUS AFB		
FUEL FACILITIES REPLACEMENT	16,800	16,800
ARMY NATIONAL GUARD		
CAMP SHELBY		
AUTOMATED MULTIPURPOSE MACHINE GUN RANGE	8,100	8,100
TOTAL, MISSISSIPPI	24,900	24,900
MISSOURI		
DEFENSE-WIDE		
FORT LEONARD WOOD		
HOSPITAL REPLACEMENT (INCR 2)	50,000	50,000
ST LOUIS		
NEXT NGA WEST (N2W) COMPLEX PHASE 2, (INC 2)	218,800	118,800
ARMY NATIONAL GUARD		
SPRINGFIELD		
NATIONAL GUARD READINESS CENTER	12,000	12,000
AIR NATIONAL GUARD		
ROSECRANS MEMORIAL AIRPORT		
C-130 FLIGHT SIMULATOR FACILITY	9,500	9,500
TOTAL, MISSOURI	290,300	190,300

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
MONTANA		
AIR FORCE		
MALMSTROM AFB		
WEAPONS STORAGE AND MAINTENANCE FACILITY	235,000	117,500
TOTAL, MONTANA	235,000	117,500
NEBRASKA		
ARMY NATIONAL GUARD		
BELLEVUE		
NATIONAL GUARD READINESS CENTER	29,000	29,000
TOTAL, NEBRASKA	29,000	29,000
NEVADA		
AIR FORCE		
NELLIS AFB		
365TH ISR GROUP FACILITY	57,000	57,000
F-35A MUNITIONS ASSEMBLY CONVEYOR FACILITY	8,200	8,200
TOTAL, NEVADA	65,200	65,200
NEW HAMPSHIRE		
ARMY NATIONAL GUARD		
CONCORD		
NATIONAL GUARD READINESS CENTER	5,950	5,950
TOTAL, NEW HAMPSHIRE	5,950	5,950
NEW MEXICO		
AIR FORCE		
KIRTLAND AFB		
COMBAT RESCUE HELICOPTER SIMULATOR (CRH) ADAL	15,500	15,500
UH-1 REPLACEMENT FACILITY	22,400	22,400
TOTAL, NEW MEXICO	37,900	37,900
NEW YORK		
ARMY		
FORT DRUM		
UNMANNED AERIAL VEHICLE HANGAR	23,000	23,000
TOTAL, NEW YORK	23,000	23,000

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
NORTH CAROLINA		
ARMY		
FORT BRAGG		
DINING FACILITY	12,500	12,500
NAVY		
CAMP LEJEUNE		
2ND RADIO BN COMPLEX, PHASE 2	25,650	25,650
ACV-AAV MAINTENANCE FACILITY UPGRADES	11,570	---
10TH MARINES HIMARS COMPLEX	35,110	35,110
II MEF OPERATIONS CENTER REPLACEMENT	122,200	62,200
2ND MARDIV/2ND MLG OPS CENTER REPLACEMENT	60,130	60,130
CHERRY POINT MARINE CORPS AIR STATION		
AIRCRAFT MAINTENANCE HANGAR	73,970	73,970
F-35 TRAINING AND SIMULATOR FACILITY	53,230	53,230
ATC TOWER AND AIRFIELD OPERATIONS	61,340	61,340
FLIGHTLINE UTILITY MODERNIZATION	51,860	51,860
NEW RIVER		
CH-53K CARGO LOADING TRAINER	11,320	11,320
DEFENSE-WIDE		
FORT BRAGG		
SOF HUMAN PLATFORM-FORCE GENERATION FACILITY	43,000	43,000
SOF ASSESSMENT AND SELECTION TRAINING COMPLEX	12,103	12,103
SOF OPERATIONS SUPPORT BUILDING	29,000	29,000
CAMP LEJEUNE		
SOF MARINE RAIDER REGIMENT HEADQUARTERS	13,400	13,400
TOTAL, NORTH CAROLINA	616,383	544,813
NORTH DAKOTA		
AIR FORCE		
MINOT AFB		
HELO/TRF OPS/AMU FACILITY	5,500	5,500
TOTAL, NORTH DAKOTA	5,500	5,500
OHIO		
AIR FORCE		
WRIGHT-PATTERSON AFB		
ADAL INTELLIGENCE PRODUCTION COMPLEX (NASIC)(INC 2)	120,900	120,900
TOTAL, OHIO	120,900	120,900

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
OKLAHOMA		
ARMY		
FORT SILL		
ADV INDIVIDUAL TRAINING BARRACKS CPLX, PHASE 2....	73,000	73,000
DEFENSE-WIDE		
TULSA IAP		
FUELS STORAGE COMPLEX.....	18,900	18,900
TOTAL, OKLAHOMA.....	91,900	91,900
PENNSYLVANIA		
ARMY		
CARLISLE BARRACKS		
GENERAL INSTRUCTION BUILDING.....	98,000	60,000
ARMY NATIONAL GUARD		
MOON TOWNSHIP		
COMBINED SUPPORT MAINTENANCE SHOP.....	23,000	23,000
TOTAL, PENNSYLVANIA.....	121,000	83,000
RHODE ISLAND		
DEFENSE-WIDE		
QUONSET STATE AIRPORT		
FUELS STORAGE COMPLEX REPLACEMENT.....	11,600	11,600
TOTAL, RHODE ISLAND.....	11,600	11,600
SOUTH CAROLINA		
ARMY		
FORT JACKSON		
RECEPTION COMPLEX, PHASE 2.....	54,000	54,000
DEFENSE-WIDE		
JOINT BASE CHARLESTON		
MEDICAL CONSOLIDATED STORAGE & DISTRIBUTION CENTER	33,300	33,300
TOTAL, SOUTH CAROLINA.....	87,300	87,300
SOUTH DAKOTA		
DEFENSE-WIDE		
ELLSWORTH AFB		
HYDRANT FUEL SYSTEM REPLACEMENT.....	24,800	24,800
TOTAL, SOUTH DAKOTA.....	24,800	24,800
TEXAS		
ARMY		
CORPUS CHRISTI ARMY DEPOT		
POWERTRAIN FACILITY (MACHINE SHOP).....	86,000	40,000
FORT HOOD, TEXAS		
BARRACKS.....	32,000	32,000
AIR FORCE		
JOINT BASE SAN ANTONIO		
BMT RECRUIT DORMITORY 8.....	110,000	110,000
AQUATICS TANK.....	69,000	69,000
T-XA DAL GROUND BASED TRNG SYS (GBTS) SIM.....	9,300	9,300
T-XMX TRNG SYS CENTRALIZED TRAINING FACILITY.....	19,000	19,000
TOTAL, TEXAS.....	325,300	279,300

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
UTAH		
AIR FORCE		
HILL AFB		
GBSD MISSION INTEGRATION FACILITY	108,000	40,000
JOINT ADVANCED TACTICAL MISSILE STORAGE FACILITY	6,500	6,500
NAVY		
HILL AFB		
D5 MISSILE MOTOR RECEIPT/STORAGE FACILITY (INC 2)	50,520	50,520
TOTAL, UTAH	165,020	97,020
VIRGINIA		
ARMY		
FORT BELVOIR, VA		
SECURE OPERATIONS AND ADMIN FACILITY	60,000	60,000
JOINT BASE LANGLEY-EUSTIS		
ADV INDIVIDUAL TRAINING BARRACKS COMPLEX, PHASE 4	55,000	55,000
NAVY		
NORFOLK		
MARINER SKILLS TRAINING CENTER	79,100	79,100
PORTSMOUTH		
DRY DOCK FLOOD PROTECTION IMPROVEMENTS	48,930	48,930
QUANTICO		
WARGAMING CENTER	143,350	70,000
DEFENSE-WIDE		
DAM NECK		
SOF DEMOLITION TRAINING COMPOUND EXPANSION	12,770	12,770
DEF DISTRIBUTION DEPOT RICHMOND		
OPERATIONS CENTER PHASE 2	98,800	33,000
JOINT EXPEDITIONARY BASE LITTLE CREEK - STORY		
SOF NSWG-10 OPERATIONS SUPPORT FACILITY	32,600	32,600
SOF NSWG2 JSOTF OPERATIONS TRAINING FACILITY	13,004	13,004
PENTAGON		
BACKUP GENERATOR	8,670	8,670
CONTROL TOWER AND FIRE DAY STATION	20,132	20,132
TOTAL, VIRGINIA	572,356	433,206
WASHINGTON		
ARMY		
JOINT BASE LEWIS-MCCHORD		
INFORMATION SYSTEMS FACILITY	46,000	46,000
NAVY		
BREMERTON		
DRY DOCK 4 AND PIER 3 MODERNIZATION	51,010	51,010
KEYPORT		
UNDERSEA VEHICLE MAINTENANCE FACILITY	25,050	25,050
AIR FORCE		
FAIRCHILD AFB		
CONSOLIDATED TFI BASE OPERATIONS	31,000	31,000
DEFENSE-WIDE		
JOINT BASE LEWIS-MCCHORD		
SOF 22 STS OPERATIONS FACILITY	47,700	47,700
ARMY NATIONAL GUARD		
RICHLAND		
NATIONAL GUARD READINESS CENTER	11,400	11,400
TOTAL, WASHINGTON	212,160	212,160

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
WISCONSIN		
DEFENSE-WIDE		
GENERAL MITCHELL IAP		
POL FACILITIES REPLACEMENT	25,900	25,900
AIR NATIONAL GUARD		
TRUAX FIELD		
F-35 SIMULATOR FACILITY	14,000	14,000
FIGHTER ALERT SHELTERS	20,000	20,000
ARMY RESERVE		
FORT MCCOY		
TRANSIENT TRAINING BARRACKS	25,000	25,000
TOTAL, WISCONSIN	84,900	84,900
WYOMING		
AIR FORCE		
F.E. WARREN AFB		
CONSOLIDATED HELO/TRF OPS/AMU AND ALERT FACILITY	18,100	18,100
TOTAL, WYOMING	18,100	18,100
CONUS CLASSIFIED		
DEFENSE-WIDE		
CLASSIFIED LOCATION		
BATTALION COMPLEX. PHASE 3	82,200	82,200
TOTAL, CONUS CLASSIFIED	82,200	82,200
AUSTRALIA		
AIR FORCE		
TINDAL		
APR-RAAF TINDAL/BULK STORAGE TANKS	59,000	59,000
APR - RAAF TINDAL/EARTH COVERED MAGAZINE	11,600	11,600
TOTAL, AUSTRALIA	70,600	70,600
BAHRAIN ISLAND		
NAVY		
SW ASIA		
ELECTRICAL SYSTEM UPGRADE	53,360	---
TOTAL, BAHRAIN ISLAND	53,360	---
CYPRUS		
AIR FORCE		
RAF AKROTIRI		
NEW DORMITORY FOR ONE ERS	27,000	27,000
TOTAL, CYPRUS	27,000	27,000
GERMANY		
DEFENSE-WIDE		
GEILENKIRCHEN AFB		
AMBULATORY CARE CENTER/DENTAL CLINIC	30,479	30,479
TOTAL, GERMANY	30,479	30,479

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
GUAM		
NAVY		
JOINT REGION MARIANAS		
BACHELOR ENLISTED QUARTERS H	164,100	64,100
EOD COMPOUND FACILITIES	61,900	61,900
MACHINE GUN RANGE (INC 2)	91,287	91,287
AIR FORCE		
JOINT REGION MARIANAS		
MUNITIONS STORAGE IGLOOS III	65,000	65,000
DEFENSE-WIDE		
JOINT REGION MARIANAS		
XRAY WHARF REFUELING FACILITY	19,200	19,200
TOTAL, GUAM	401,487	301,487
HONDURAS		
ARMY		
SOTO CANO AB		
AIRCRAFT MAINTENANCE HANGAR	34,000	34,000
TOTAL, HONDURAS	34,000	34,000
ITALY		
NAVY		
SIGONELLA		
COMMUNICATIONS STATION	77,400	---
TOTAL, ITALY	77,400	---
JAPAN		
NAVY		
IWAKUNI		
VTOL PAD - SOUTH	15,870	15,870
YOKOSUKA		
PIER 5 (BERTHS 2 AND 3)	174,692	100,000
AIR FORCE		
YOKOTA AB		
FUEL RECEIPT AND DISTRIBUTION UPGRADE	12,400	12,400
DEFENSE-WIDE		
YOKOSUKA		
KINNICK HIGH SCHOOL (INC 2)	130,386	---
YOKOTA AB		
BULK STORAGE TANKS PH1	116,305	20,000
PACIFIC EAST DISTRICT SUPERINTENDENT'S OFFICE	20,106	20,106
TOTAL, JAPAN	469,759	168,376
JORDAN		
AIR FORCE		
AZRAQ		
AIR TRAFFIC CONTROL TOWER	24,000	---
MUNITIONS STORAGE AREA	42,000	---
TOTAL, JORDAN	66,000	---

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
MARIANA ISLANDS		
AIR FORCE		
TINIAN		
AIRFIELD DEVELOPMENT, PHASE 1	109,000	25,000
FUEL TANKS W/ PIPELINE/HYDRANT SYSTEM	109,000	25,000
PARKING APRON	98,000	25,000
TOTAL, MARIANA ISLANDS	316,000	75,000
PUERTO RICO		
AIR NATIONAL GUARD		
LUIS MUNOZ-MARIN IAP		
COMMUNICATIONS FACILITY	12,500	---
MAINTENANCE HANGAR	37,500	---
TOTAL, PUERTO RICO	50,000	---
UNITED KINGDOM		
AIR FORCE		
ROYAL AIR FORCE LAKENHEATH		
F-35A PGM FACILITY	14,300	14,300
TOTAL, UNITED KINGDOM	14,300	14,300
WORLDWIDE CLASSIFIED		
DEFENSE-WIDE		
MISSION SUPPORT COMPOUND	52,000	---
TOTAL, WORLDWIDE CLASSIFIED	52,000	---
NORTH ATLANTIC TREATY ORGANIZATION (NATO)		
NATO SECURITY INVESTMENT PROGRAM	144,040	172,005
BASE REALIGNMENT AND CLOSURE		
DEPARTMENT OF DEFENSE BASE CLOSURE ACCOUNT	278,526	398,526

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
WORLDWIDE UNSPECIFIED		
ARMY		
HOST NATION SUPPORT	31,000	31,000
PLANNING AND DESIGN	94,099	105,099
MAJOR CONSTRUCTION	211,000	---
MINOR CONSTRUCTION	70,600	70,600
NAVY		
PLANNING AND DESIGN	167,715	178,715
MINOR CONSTRUCTION	81,237	81,237
AIR FORCE		
PLANNING AND DESIGN	142,148	153,148
MINOR CONSTRUCTION	79,682	79,682
DEFENSE-WIDE		
CONTINGENCY CONSTRUCTION	10,000	---
ENERGY RESILIENCE AND CONSERVATION INVESTMENT PROGRAM	150,000	190,000
PLANNING AND DESIGN		
DEFENSE WIDE	14,400	14,400
ERCIP DESIGN	10,000	10,000
DEFENSE HEALTH AGENCY	63,382	63,382
DEFENSE LOGISTICS AGENCY	27,000	27,000
DEFENSE EDUCATION ACTIVITY	29,679	29,679
MISSILE DEFENSE AGENCY	35,472	35,472
NATIONAL SECURITY AGENCY	15,000	15,000
SPECIAL OPERATIONS COMMAND	52,532	52,532
WASHINGTON HEADQUARTERS SERVICE	4,890	4,890
SUBTOTAL, PLANNING AND DESIGN	252,355	252,355
UNSPECIFIED MINOR CONSTRUCTION		
DEFENSE WIDE	3,000	3,000
DEFENSE HEALTH AGENCY	10,000	10,000
DEFENSE LOGISTICS AGENCY	16,736	16,736
DEFENSE EDUCATION ACTIVITY	8,000	8,000
THE JOINT STAFF	11,770	11,770
MISSILE DEFENSE AGENCY	10,000	10,000
NATIONAL SECURITY AGENCY	3,228	3,228
SPECIAL OPERATIONS COMMAND	31,464	31,464
WASHINGTON HEADQUARTERS SERVICE	4,950	4,950
SUBTOTAL, UNSPECIFIED MINOR CONSTRUCTION	99,148	99,148
ARMY NATIONAL GUARD		
PLANNING AND DESIGN	20,469	20,469
MINOR CONSTRUCTION	15,000	15,000
AIR NATIONAL GUARD		
PLANNING AND DESIGN	17,000	17,000
MINOR CONSTRUCTION	31,471	31,471
ARMY RESERVE		
PLANNING AND DESIGN	6,000	6,000
MINOR CONSTRUCTION	8,928	8,928
NAVY RESERVE		
PLANNING AND DESIGN	4,780	4,780
MINOR CONSTRUCTION	24,915	24,915
AIR FORCE RESERVE		
PLANNING AND DESIGN	4,604	4,604
MINOR CONSTRUCTION	12,146	12,146

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
FAMILY HOUSING, ARMY		
PENNSYLVANIA		
TOBYHANNA ARMY DEPOT		
FAMILY HOUSING REPLACEMENT CONSTRUCTION (26 UNITS)	19,000	19,000
KOREA		
CAMP HUMPHREYS		
FAMILY HOUSING NEW CONSTRUCTION INCR 4 (432 UNITS)	83,167	83,167
GERMANY		
BAUMHOLDER		
FAMILY HOUSING IMPROVEMENTS (68 UNITS)	29,983	29,983
PLANNING AND DESIGN	9,222	9,222
SUBTOTAL, CONSTRUCTION	141,372	141,372
OPERATION AND MAINTENANCE		
UTILITIES ACCOUNT	55,712	55,712
MANAGEMENT ACCOUNT	38,898	38,898
SERVICES ACCOUNT	10,156	10,156
FURNISHINGS ACCOUNT	24,027	24,027
MISCELLANEOUS ACCOUNT	484	484
LEASING	128,938	128,938
MAINTENANCE OF REAL PROPERTY	81,065	81,065
HOUSING SUPPORT COSTS	18,627	68,627
SUBTOTAL, OPERATION AND MAINTENANCE	357,907	407,907
FAMILY HOUSING, NAVY AND MARINE CORPS		
CONSTRUCTION IMPROVEMENTS	41,798	41,798
USMC DPRI/GUAM PLANNING AND DESIGN	2,000	2,000
PLANNING AND DESIGN	3,863	3,863
SUBTOTAL, CONSTRUCTION	47,661	47,661
OPERATION AND MAINTENANCE		
UTILITIES ACCOUNT	63,229	63,229
MANAGEMENT ACCOUNT	50,122	50,122
SERVICES ACCOUNT	16,647	16,647
FURNISHINGS ACCOUNT	19,009	19,009
MISCELLANEOUS ACCOUNT	151	151
LEASING	64,126	64,126
MAINTENANCE OF REAL PROPERTY	82,611	82,611
HOUSING SUPPORT COSTS	21,975	81,575
SUBTOTAL, OPERATION AND MAINTENANCE	317,870	377,470

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
FAMILY HOUSING, AIR FORCE		
CONSTRUCTION		
GERMANY		
SPANGDAHLEM		
NEW CONSTRUCTION	53,584	53,584
CONSTRUCTION IMPROVEMENTS	46,638	46,638
PLANNING AND DESIGN	3,409	3,409
SUBTOTAL, CONSTRUCTION	103,631	103,631
OPERATION AND MAINTENANCE		
UTILITIES ACCOUNT	42,732	42,732
MANAGEMENT ACCOUNT	56,022	56,022
SERVICES ACCOUNT	7,770	7,770
FURNISHINGS ACCOUNT	30,283	30,283
MISCELLANEOUS ACCOUNT	2,144	2,144
LEASING	15,768	15,768
MAINTENANCE OF REAL PROPERTY	117,704	117,704
HOUSING SUPPORT COSTS	22,593	53,793
SUBTOTAL, OPERATION AND MAINTENANCE	295,016	326,216
FAMILY HOUSING, DEFENSE-WIDE		
OPERATION AND MAINTENANCE		
NATIONAL SECURITY AGENCY		
UTILITIES	13	13
FURNISHING	82	82
LEASING	12,906	12,906
MAINTENANCE OF REAL PROPERTY	32	32
DEFENSE INTELLIGENCE AGENCY		
UTILITIES	4,100	4,100
FURNISHINGS	645	645
LEASING	39,222	39,222
SUBTOTAL, OPERATION AND MAINTENANCE	57,000	57,000
DOD MILITARY UNACCOMPANIED HOUSING IMPROVEMENT FUND	500	500
DOD FAMILY HOUSING IMPROVEMENT FUND	3,045	3,045

MILITARY CONSTRUCTION
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
ADMINISTRATIVE PROVISIONS		
MILITARY CONSTRUCTION, ARMY	---	79,500
MILITARY CONSTRUCTION, NAVY AND MARINE CORPS	---	546,800
MILITARY CONSTRUCTION, AIR FORCE	---	230,400
MILITARY CONSTRUCTION, ARMY NATIONAL GUARD	---	155,000
MILITARY CONSTRUCTION, AIR NATIONAL GUARD	---	57,000
MILITARY CONSTRUCTION, AIR FORCE RESERVE	---	24,800
RESCISSIONS FROM PRIOR YEAR UNOBLIGATED BALANCES		
MILITARY CONSTRUCTION, DEFENSE-WIDE (RESCISSION)	---	-45,055

OVERSEAS CONTINGENCY OPERATIONS
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
BAHRAIN		
NAVY		
SW ASIA		
ELECTRICAL SYSTEMS UPGRADE	---	53,360
TOTAL, BAHRAIN	---	53,360
GERMANY		
DEFENSE-WIDE		
GEMERSHEIM		
EDI: LOGISTICS DISTRIBUTION CENTER ANNEX	46,000	46,000
TOTAL, GERMANY	46,000	46,000
GUANTANAMO BAY, CUBA		
ARMY		
GUANTANAMO BAY NAVAL STATION		
OCO: DETENTION LEGAL OFFICE AND COMMS CENTER	11,800	11,800
OCO: HIGH VALUE DETENTION FACILITY	88,500	---
OCO: COMMUNICATIONS FACILITY	22,000	22,000
TOTAL, CUBA	122,300	33,800
ICELAND		
AIR FORCE		
KEFLAVIK		
EDI: AIRFIELD UPGRADES--DANGEROUS CARGO PAD	18,000	18,000
EDI: BEDDOWN SITE PREPARATION	7,000	7,000
EDI: EXPAND PARKING APRON	32,000	32,000
TOTAL, ICELAND	57,000	57,000
ITALY		
NAVY		
SIGONELLA		
COMMUNICATIONS STATION	---	77,400
TOTAL, ITALY	---	77,400
JORDAN		
AIR FORCE		
AZRAQ		
AIR TRAFFIC CONTROL TOWER	---	24,000
MUNITIONS STORAGE AREA	---	42,000
TOTAL, JORDAN	---	66,000
SPAIN		
NAVY		
ROTA		
EDI: IN-TRANSIT MUNITIONS FACILITY	9,960	9,960
EDI: JOINT MOBILITY CENTER	46,840	46,840
EDI: SMALL CRAFT BERTHING FACILITY	12,770	12,770
AIR FORCE		
MORAN		
EDI: HOT CARGO PAD	8,500	8,500
TOTAL, SPAIN	78,070	78,070

OVERSEAS CONTINGENCY OPERATIONS
(AMOUNTS IN THOUSANDS)

	BUDGET REQUEST	HOUSE
WORLDWIDE UNSPECIFIED		
ARMY		
EDI: BULK FUEL STORAGE	36,000	36,000
EDI: INFORMATION SYSTEMS FACILITY	6,200	6,200
UNSPECIFIED WORLDWIDE CONSTRUCTION		
ARMY		
MAJOR CONSTRUCTION (EMERGENCY)	9,200,000	---
AIR FORCE		
EDI: ECAOS DABS/FEV EMEDS STORAGE	107,000	107,000
EDI: HOT CARGO PAD	29,000	29,000
EDI: MUNITIONS STORAGE AREA	39,000	39,000
PLANNING AND DESIGN		
ARMY	19,498	19,498
NAVY	25,000	25,000
AIRFORCE	61,438	61,018
MINOR CONSTRUCTION		
ARMY	5,220	5,220
AIRFORCE	12,800	12,800
EDI: VARIOUS WORLDWIDE LOCATIONS EUROPE		
ARMY	---	56,142
NAVY	---	56,246
AIRFORCE	---	56,246

NOTE: Funding for certain Military Construction projects in Bahrain, Italy, and Jordan was requested in Title I and provided in Title IV OCO
NOTE: Emergency Disaster Relief Funding is provided under Title V

MINORITY VIEWS

As reported by the Committee, the Military Construction, Veterans Affairs, and Related Agencies Appropriations bill for fiscal year 2020 provides a total of $231,349,814,000 in budget authority. Of this amount, $123,211,394,000 is for mandatory programs and $108,438,000,000 is for discretionary programs. The discretionary funding total includes $2,300,000,000 in emergency funds. The bill also includes $87,636,650,000 in advance appropriations for the Department of Veterans Affairs' health care accounts and $129,509,505,000 in advance appropriations for mandatory veterans' benefits programs for fiscal year 2021. Unfortunately, due to concerns about spending levels and numerous policy provisions contained in the bill, we are unable to support the bill as written at this time.

We are troubled that the Majority party's budget framework does not reflect a bipartisan, bicameral agreement. That framework puts the Federal government on track to add nearly $2,000,000,000,000 in deficits over 10 years, while the national debt is already more than $22,000,000,000,000. In addition, the Majority supports more than twice as much additional funding in fiscal year 2020 for non-defense programs as for defense programs.

We need to come together with the Senate and the Administration to reach an agreement on the topline funding level before we allocate funding among the various appropriations bills. We should see how the Military Construction and Veterans Affairs bill fits into the larger picture before moving forward.

In addition to overall funding concerns, Republican Members of the Committee were disappointed by several policy provisions and funding decisions made within the bill. These positions could prevent this bill from being signed into law, and House Republicans will continue to work to address these issues as the appropriations process continues.

Of particular concern is Section 612, which limits the President's use of military construction funds. It is an unnecessary restriction on the President's ability and responsibility to respond to national emergencies. We believe we must provide the President with the tools to address the humanitarian and security crisis on our Southern border.

The facts are undeniable, and the strain on the system is unsustainable. Record-breaking numbers of people, primarily from Central American countries but also from other countries around the world, are coming through Mexico to the Southern border. Unauthorized border crossings are now at a 12-year high, and the system is overwhelmed by unaccompanied children and family units. More than 109,000 people came to the border in April alone, compared to approximately 400,000 in all of 2018.

Recognizing the bipartisan concern about using previously appropriated military construction funds for border security projects and well aware of the indisputable need to reinvest in our military's readiness and infrastructure, Republican Members of the Committee supported Subcommittee Ranking Member Rep. John Carter's amendment to provide $7,200,000,000 in emergency funding for border security projects. The amendment provided the same amount the President requested in the fiscal year 2020 budget request and would have transferred funds to the Department of Homeland Security to implement the Border Security Improvement Plan.

While the amendment was defeated, we continue to believe the Committee will need to address the President's request and provide funding for border security and humanitarian needs before the fiscal year 2020 appropriations cycle concludes.

The bill also does not continue the current prohibition on the transfer of detainees at Guantanamo Bay, Cuba, to the United States, nor does it provide funding for a new detention facility at Guantanamo Bay. We believe the prohibition on transferring detainees to the United States and the new funding are needed. We must not bring the world's most dangerous terrorists to American soil, and the Service men and women guarding the detainees at Guantanamo Bay must have the safest possible work environment.

Despite our disagreements over the issues discussed above, we appreciate the Majority's willingness to address Member priorities in the bill and report and to include Minority Committee Members in the development of the bill. The Subcommittee has a long-standing tradition of bipartisanship, and we will continue to work in good faith with our colleagues as we proceed through the appropriations process. By working together, we can best address the needs of our Nation's military and its Veterans and reach an agreement on funding for the Military Construction, Veterans Affairs, and Related Agencies for the next fiscal year.

KAY GRANGER.
JOHN R. CARTER.

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